

DUANE JACKSON FOR CONGRESS

RECEIVED

2012 APR 23 PM 12:06

FEC MAIL CENTER

April 17, 2012

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

Dear Sir or Madame:

On behalf of Duane Jackson For Congress, I am sending you the enclosed Amended FEC Form 3 with all its required attachments as our District in New York has been changed from District 19 to District 18. The original for this FEC 3 was filed on April 16, 2012 and are being amended on April 17, 2012 along with this letter. This was necessary as a page was left out the correct copied pages were mixed up. I am sorry for this inconvenience.

Sincerely,



Antoinette R. Wahlman
Treasurer, Duane Jackson For Congress

12030792933

FedEx *NEW Package*
Express US Airbill FedEx Tracking Number **8756 4506 7193**



1 From Please print and press hard. Sender's FedEx Account Number **1584124438**
 Date **4/14/2021** FIRST CLASS

Sender's Name **Anthony R. Jackson** Phone **914, 294-6571**

Company **Duane Jackson For Congress**
 Address **6 CARB Drive** Dept./Room/Suite/Room

City **Beaumont** State **TX** ZIP **77705**
 2 Your Internal Billing Reference **9910831**

3 To Recipient's Name **FEC** Phone **1**

Company _____
 Address **999 E Street NW** Dept./Room/Suite/Room
 We cannot deliver to P.O. boxes or P.O. ZIP codes.
 Address _____
 Use this line for the HOLD location address or for continuation of your shipping address.
 City **WASHINGTON DC** State **DC** ZIP **205463**

The FedEx-US Airbill has changed. See Section 4.
 For shipments over 150 lbs., order the new FedEx Express Freight US Airbill.

4 Express Package Service *To most locations. NOTE: Service order has changed. Please select carefully. **Package up to 150 lbs. For packages over 150 lbs., order the new FedEx Express Freight US Airbill.**

Next Business Day **NEW FedEx 2Day A.M.** Second business morning. Saturday Delivery NOT available.

FedEx Priority Overnight Next business morning. *Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

FedEx Standard Overnight Next business afternoon. *Saturday Delivery NOT available.

5 Packaging *Declared value limit \$500. **FedEx Envelope*** **FedEx Pak*** **FedEx Box** **FedEx Tube** **Other**

6 Special Handling and Delivery Signature Options **SATURDAY Delivery** RAT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

No Signature Required **Direct Signature** Printed name of recipient. Signature required. Address must be verified. Signature required. Fee applies. Obtain a signature for delivery. **Indirect Signature** If you are a retailer or recipient, you may use this option. Signature required. Address must be verified. For residential deliveries only. Fee applies.

Does this shipment contain dangerous goods? **No** **Yes** one box must be checked. **Yes** As required. Shipper's Declaration. Dry Ice & UN 186. Cargo Aircraft Only.

7 Payment Bill to: **Sender** **Account No. is shown** **Recipient** **Third Party** **Credit Card** **Cash/Check**

Total Packages **1** Total Weight **10** Total Declared Value **612**

For liability limited to \$100 unless you declare a higher value. See back for details. By using this form you agree to the conditions on the back of this airbill and in the contract with the carrier. See back for details. See back for details.

REF626703021

RETAIN THIS COPY FOR YOUR RECORDS

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED

2012 APR 23 PM 12:07

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

12FE4M5

FEC MAIL CENTER

DUANE JACKSON FOR CONGRESS

ADDRESS (number and street) PO BOX 142 6 LAKE DRIVE

Check if different than previously reported. (ACC)

BUCHANAN NY 11051-1041

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE STATE DISTRICT

000516286

3. IS THIS REPORT NEW OR AMENDED

NEW (N) OR AMENDED (A)

NY 110

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 Wahlman

Signature of Treasurer [Signature] 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.

Table with 10 columns and 1 row. Office Use Only label in first column. FEC FORM 3 (Revised 02/2003) in last column.

12030792935

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Duane Jackson For Congress

Report Covering the Period: From:

03 / 10 / 2012

To:

04 / 15 / 2012

12030792936

	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	5,263.00
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	1,400.00	5,263.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5,343.80	10,139.60
(b) Total Offsets to Operating Expenditures (from Line 14)	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	5,343.80	10,139.60
8. Cash on Hand at Close of Reporting Period (from Line 27)	7,555.00	
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

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:

09 / 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

495000

(ii) Unitemized.....

60000

213600

(iii) TOTAL of contributions from individuals ▶

85000

608600

(b) Political Party Committees.....

0

0

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

980000

0

(d) The Candidate.....

0

980000

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

95000

608600

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

0

0

13. LOANS:

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

980000

980000

(b) All Other Loans.....

0

0

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

980000

980000

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

0

0

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

0

0

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

1065000

1588600

12030792937

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

4,271.53

9,440.53

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES.....

0

0

19. LOAN REPAYMENTS:
(a) Of Loans Made or Guaranteed
by the Candidate.....

0

0

(b) Of All Other Loans.....

0

0

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

0

0

20. REFUNDS OF CONTRIBUTIONS TO:
(a) Individuals/Persons Other
Than Political Committees.....

0

0

(b) Political Party Committees.....

0

0

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

0

0

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

0

0

21. OTHER DISBURSEMENTS.....

0

0

22. TOTAL DISBURSEMENTS
(add Lines 17, 18, 19(c), 20(d), and 21) ▶

4,271.53

9,440.53

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

600.00

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

10,650.00

25. SUBTOTAL (add Line 23 and Line 24).....

11,250.00

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

4,271.53

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

7,978.47

12030792938

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

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

FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

PAGE / OF /

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 # 6246

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

N/A

Occupation

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).....

250.00

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

250.00

12030792939

**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 checked="" 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

A. Parking

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: **03 / 13 / 2012**

Mailing Address: **200 PARK I**

City: **NY** State: **NY** Zip Code: _____

Purpose of Disbursement: **Parking Fee** Category/Type: **0.02**

Candidate Name: **Duane Jackson**

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

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

Amount of Each Disbursement this Period: **50.00**

B. Shell oil

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: **03 / 13 / 2012**

Mailing Address: **GAS FOR CAR**

City: **Bachawan** State: **NY** Zip Code: **10511**

Purpose of Disbursement: _____ Category/Type: **0.02**

Candidate Name: **Duane JACKSON**

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

State: _____ District: _____

Amount of Each Disbursement this Period: **60.00**

C. Getty GAS

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: **03 / 14 / 2012**

Mailing Address: _____

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

Purpose of Disbursement: **GAS FOR CAR** Category/Type: **0.02**

Candidate Name: **Duane Jackson**

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

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

Amount of Each Disbursement this Period: **75.00**

SUBTOTAL of Disbursements This Page (optional) **185.00**

TOTAL This Period (last page this line number only) **427.53**

12030792940

**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

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. **P O - Post office**
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

0.01
Category/
Type

Candidate Name
Duane JACKSON

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

State: **NY** District: **19**

Full Name (Last, First, Middle Initial)

B. **Walmart**
Mailing Address

Date of Disbursement

03 / 19 / 2012

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

Amount of Each Disbursement this Period

154.9

Purpose of Disbursement
Supplies

0.01
Category/
Type

Candidate Name
Duane JACKSON

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

State: **NY** District: **19**

Full Name (Last, First, Middle Initial)

C. **WALMART**
Mailing Address

Date of Disbursement

03 / 23 / 2012

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

Amount of Each Disbursement this Period

13.45

Purpose of Disbursement
Supplies

0.01
Category/
Type

Candidate Name
Duane JACKSON

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

State: **NY** District: **19**

Full Name (Last, First, Middle Initial)

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

49.62

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

427.53

12030792941

**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 checked="" 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

12030792942

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NAME OF COMMITTEE (In Full)
Duane Jackson For Congress

A. OFFICE MAY

Full Name (Last, First, Middle Initial)

Mailing Address: **CORLANDT TOWN CTR**

City: **MOHEGAN LAKE NY** State: **NY** Zip Code: **10567**

Purpose of Disbursement: **CALENDARS**

Candidate Name: **Duane Jackson**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

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

Date of Disbursement: **03 / 23 / 2012**

Amount of Each Disbursement this Period: **12.86**

Category/Type: **001**

B. Dollar Tree

Full Name (Last, First, Middle Initial)

Mailing Address

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

Purpose of Disbursement: **Chip Boards**

Candidate Name: **Duane Jackson**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

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

Date of Disbursement: **03 / 23 / 2012**

Amount of Each Disbursement this Period: **40.90**

Category/Type: **001**

C. Shell

Full Name (Last, First, Middle Initial)

Mailing Address

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

Purpose of Disbursement: **GAS**

Candidate Name: **Duane Jackson**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

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

Date of Disbursement: **03 / 24 / 2012**

Amount of Each Disbursement this Period: **110.00**

Category/Type: **002**

SUBTOTAL of Disbursements This Page (optional)..... **103.66**

TOTAL This Period (last page this line number only)..... **427.153**

**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

<input checked="" 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. <u>KU YAY RESTURANT</u>		Date of Disbursement
Mailing Address		MM / DD / YYYY 03 / 28 / 2012
City	State	Amount of Each Disbursement this Period
<u>Poughkeepsie</u>	<u>NY</u>	
Purpose of Disbursement	Zip Code	
<u>Meals</u>		1,021.5
Candidate Name	Category/Type	
<u>Duane JACKSON</u>	<u>002</u>	
Office Sought:	Disbursement For:	
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>NY</u> District: <u>18</u>		

B. <u>PARKING</u>		Date of Disbursement
Mailing Address		MM / DD / YYYY 03 / 28 / 2012
City	State	Amount of Each Disbursement this Period
<u>Poughkeepsie</u>	<u>NY</u>	
Purpose of Disbursement	Zip Code	
<u>Fee</u>		37.89
Candidate Name	Category/Type	
<u>Duane JACKSON</u>	<u>002</u>	
Office Sought:	Disbursement For:	
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>NY</u> District: <u>18</u>		

C. <u>VISTA PRINT</u>		Date of Disbursement
Mailing Address		MM / DD / YYYY 03 / 09 / 2012
City	State	Amount of Each Disbursement this Period
<u>email account - WWW.VISTAPRINT.COM</u>		
Purpose of Disbursement	Zip Code	
<u>BUSINESS CARDS</u>		90.10
Candidate Name	Category/Type	
<u>Duane JACKSON</u>	<u>006</u>	
Office Sought:	Disbursement For:	
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>NY</u> District: <u>18</u>		

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

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

283.14
4,221.53

12030792943

**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

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. Trustco
Mailing Address 20 Welcher Avenue
City Peekskill State NY Zip Code 10566
Purpose of Disbursement BANK Fee
Candidate Name _____
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: NY District: 18

Date of Disbursement

03 / 30 / 2012

Amount of Each Disbursement this Period

50

0.01
Category/
Type

Full Name (Last, First, Middle Initial)

B. Dollar Tree
Mailing Address Beach Shop Ctr.
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: 18

Date of Disbursement

03 / 28 / 2012

Amount of Each Disbursement this Period

32.05

0.01
Category/
Type

Full Name (Last, First, Middle Initial)

C. Dollar Tree
Mailing Address Beach Shop Ctr
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: 18

Date of Disbursement

03 / 30 / 2012

Amount of Each Disbursement this Period

9.66

0.01
Category/
Type

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

22.21

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

4271.53

12030792944

**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 6 OF 11
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

12030792845

A. Full Name (Last, First, Middle Initial) **Lisa Posey**

Mailing Address **4720 Center Blvd #1909**

City **Long Island City** State **NY** Zip Code **11109**

Purpose of Disbursement **FUND RAISER** Category/Type **0.03**

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

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

Date of Disbursement: **03/31/2012**

Amount of Each Disbursement this Period: **1,150.00**

B. Full Name (Last, First, Middle Initial) **US Post Office**

Mailing Address _____

City **Peekskill** State **NY** Zip Code **10576**

Purpose of Disbursement **mail fee** Category/Type **0.01**

Candidate Name **Duane Jackson**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

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

Date of Disbursement: **04/02/2012**

Amount of Each Disbursement this Period: **1320**

C. Full Name (Last, First, Middle Initial) **Office Max**

Mailing Address **Cortlandt Town Ctr**

City **Mohagan Lake** State **NY** Zip Code **10566**

Purpose of Disbursement **toner** Category/Type **0.01**

Candidate Name **Duane Jackson**

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: **74.02**

SUBTOTAL of Disbursements This Page (optional) **1,237.28**

TOTAL This Period (last page this line number only) **4,271.53**

**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 7 OF 11

<input checked="" 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)

Date of Disbursement

M M / D D / Y Y Y Y
<u>09</u> / <u>06</u> / <u>2012</u>

Amount of Each Disbursement this Period

<u>10,000.00</u>

A. Lisa Posey

Mailing Address

4720 Center Blvd #1905

City Long Island City State NY Zip Code 11109

City New York

Purpose of Disbursement

FUND RAISER

<u>003</u>

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)

Date of Disbursement

M M / D D / Y Y Y Y
<u>04</u> / <u>06</u> / <u>2012</u>

Amount of Each Disbursement this Period

<u>52.92</u>

B. Shell oil

Mailing Address

City Peekskill State NY Zip Code 10565

Purpose of Disbursement

SAS

<u>002</u>

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)

Date of Disbursement

M M / D D / Y Y Y Y
<u>09</u> / <u>09</u> / <u>2012</u>

Amount of Each Disbursement this Period

<u>50.00</u>

C. US Post office

Mailing Address

City Buchanan State NY Zip Code 10567

Purpose of Disbursement

PO Box Fee

<u>001</u>

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).....

<u>11,029.2</u>

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

<u>427,153</u>

12030792946

**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 checked="" 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)

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2012

A. Office MAX

Mailing Address

Cortlandt Town Ctr

City

Mohesaw Lake NY 10561

Purpose of Disbursement

Copies

001

Candidate Name

Duane Jackson

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: NY

District: 12

Amount of Each Disbursement this Period

480

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2012

B. Dollar Tree

Mailing Address

Beach Shop Ctr

City

Peekskill NY 10564

Purpose of Disbursement

Supplies

001

Candidate Name

Duane Jackson

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: NY

District: 12

Amount of Each Disbursement this Period

640

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2012

C. Troy Williams

Mailing Address

Montrose Va Hospital

City

Montrose NY 10511

Purpose of Disbursement

Petition Help

001

Candidate Name

Duane Jackson

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: NY

District: 12

Amount of Each Disbursement this Period

35000

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

36120

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

427153

12030792947

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

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NAME OF COMMITTEE (In Full)

Duane Jackson For Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

09 / 15 / 2012

A.

Debra DANZEY

Mailing Address

Montrose Va Hospital

City

Montrose

State

NY

Zip Code

Purpose of Disbursement

petitions help

001

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)

Amount of Each Disbursement this Period

1,000.00

B.

Stephanie Foxworth

Mailing Address

939 Orchard St

City

Peekskill NY

State

Zip Code

10569

Purpose of Disbursement

petitions help

001

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)

Date of Disbursement

09 / 15 / 2012

Amount of Each Disbursement this Period

1,750.00

C.

MA LIKA GARRET

Mailing Address

1104 HOWARD Street

City

Peekskill

State

NY

Zip Code

10566

Purpose of Disbursement

petitions help

001

Candidate Name

Duane JACKSON

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: *NY*

District: *18*

Date of Disbursement

09 / 15 / 2012

Amount of Each Disbursement this Period

1,250.00

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

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

4,000.00

4,271.53

12030792948

**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 checked="" 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. <u>Stephanie Foxworth</u>		Date of Disbursement
Mailing Address <u>936 Orchard Street</u>		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y <u>09 / 14 / 2012</u>
City <u>Peekskill</u>	State <u>NY</u>	Zip Code <u>10864</u>
Purpose of Disbursement <u>Petitions help</u>		Amount of Each Disbursement this Period
Candidate Name <u>Duane Jackson</u>		<input type="text"/> \$ <u>75.00</u>
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: <u>NY</u>	District: <u>18</u>	

B. <u>CARMEN RAMIREZ</u>		Date of Disbursement
Mailing Address <u>19 Doris Lee Drive</u>		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y <u>04 / 15 / 2012</u>
City <u>Cortlandt Manor</u>	State <u>NY</u>	Zip Code <u>10568</u>
Purpose of Disbursement <u>Petitions help</u>		Amount of Each Disbursement this Period
Candidate Name <u>Duane Jackson</u>		<input type="text"/> \$ <u>240.00</u>
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: <u>NY</u>	District: <u>18</u>	

C. <u>John De boy</u>		Date of Disbursement
Mailing Address <u>Montrose VA Hospital</u>		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y <u>01 / 15 / 2012</u>
City <u>Montrose NY</u>	State <u>NY</u>	Zip Code <u>10864</u>
Purpose of Disbursement <u>Petitions help</u>		Amount of Each Disbursement this Period
Candidate Name <u>Duane Jackson</u>		<input type="text"/> \$ <u>1,000.00</u>
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: <u>NY</u>	District: <u>18</u>	

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

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

<input type="text"/> \$ <u>416.500</u>
<input type="text"/> \$ <u>4,217.53</u>

12030792949

**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

17 20a 18 20b 19a 20c 19b 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 4720 Center Blvd #1909

City Long Island City State NY Zip Code 11109

Purpose of Disbursement

Fund Raising

Candidate Name

Duane Jackson

0.63
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: NY District: 18

Date of Disbursement

09 / 15 / 2015

Amount of Each Disbursement this Period

1.50.00

Full Name (Last, First, Middle Initial)

B. Malika Garret

Mailing Address

City Peekskill State NY Zip Code 10564

Purpose of Disbursement

Petitions help

Candidate Name

Duane Jackson

0.01
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: NY District: 18

Date of Disbursement

09 / 15 / 2012

Amount of Each Disbursement this Period

1.00.00

Full Name (Last, First, Middle Initial)

C. Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2500.00

4217.53

12030792950

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE / OF /

FOR LINE NUMBER: (check only one) 13a 13b

12030792951

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 10511-0142

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
98,000.00

TERMS Date Incurred Date Due Interest Rate Secured:
 Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <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)

TOTALS This Period (last page in this line only) **98,000.00**

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

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
4/17/12
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
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

4/23/12
DATE PREPARED

12030792952