### **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	on 202	2C0967			Report		CA	NDII	DATE	<b>√</b>	CO	MMITTEE		LOB	BYIST		
Name of Filing C	Committee, Cand	date or L	obbyist:	İ	BANTA,	JACC	)B DA	NIEI	L								
Street Address:																	
City:	_						State	e:				Zip Code	e: 16	5441			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA		Р	OST-	3.		AMENDME REPORT?	NT	Yes	N	0	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5. <b>X</b>	30 DA		Р	OST-	6.		TERMINAT REPORT?	ΓΙΟΝ	Yes	N	0	<b>\</b>
report type)	ANNUAL REPOR	<b>T</b> 7.	<b>Year</b> 2022				NG ME CHEC					PAPER		<b>V</b>	DISK	ETTE	
Name of Office S	Sought by Candid	ate:	-		·		DAT	ΕO	F ELE	CTI	ON	District Number	Office Code	Pai	ty Cod	Code	
	- ,						МО		DAY	Y	/EAR	4	STH	REF	)	25	
REPRESENTATI	VE IN THE GEN	ERAL ASS	EMBLY					11		8	2022		(SEE IN	STRUCTI	ONS FOR	CODES	6)
Summary of		МО	DAY	YEAR			МО		DAY	Y	/EAR	FOF	OFFIC	CE USE	ONLY	,	
Expenditures	from:		6 7	20	)22 <b>T</b>	0		10		24	2022						
A. Amount Bro	ught Forward Fro	om Last R	eport		·	\$			•		0.00						
B. Total Moneta	ary Contribution	s And Rec	eipts (From	Sche	dule I)	\$					0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 0.00																	
D. Total Expenditures (From Schedule III) \$ 0.00																	
E. Ending Cash Balance (Subtract Line D From Line C) \$ 0.00																	
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	chedul	e II)	\$	1				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV	)		\$	,				0.00						
				AFF:	IDAVI	T SE	CTIC	NC									
PART I - If this is			_								_						
I swear (or affirm) correct and comple	) that this report, ir ete.	cluding the	e attached sc	nedules	filed on	paper	or by e	electr	ronic m	ediur	m, are to t	he best of	my knov	wledge	and be	lief , tr	rue
Sworn to and subs	cribed before me tl day of	nis	20								Signature	of Person	Submit	ting Re	oort		_
	Signa					_						Printe	ed Name	e			-
My Commission Ex	-	.ure										Email					-
	МО	D.	AY	YR				,	Ar	ea Co	ode	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	authorized	Comm	ittee, C	andid	late sl	nall s	sign h	ere.							
I swear (or affirm) No 320) as amende		my knowle	edge and beli	ef this	political	comm	ittee h	as no	ot viola	ted a	ny provis	ions of the	act of J	une 3,1	937 (P.	L. 133	з,
Sworn to and subsc		s									s	ignature of	Candida	ate			- $ $
	day of ————————————————————————————————————					_						Printed	Name				_
	Signature					-											_
My Commission Exp	ires											Email					
	МО	D	AY	YR		-			Area	Code	•	Day	time T	elephor	ne Num	ber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
BANTA, JACOB DANIEL	From:	6/7/202	<u>2</u> To:	10/24/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)	\$	0.00		
TOTAL for the Reporting	(2)	\$	0.00	
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

#### **PART A**

#### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidat	Reporting	Period					
		'	From:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Committee			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

0.00

### ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee or Candidate				Reporting Period					
			From	n:		To	<b>)</b> :		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
							۱ ـ	0.00	
Mailing Address							\$	0.00	
Mailing Address City	State	Zip Code (Plus 4)	)				<b>*</b>	0.00	

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

#### **PART C**

### **Contributions Received From Political Committees**

**OVER \$250.00** 

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting Period					
			From:			То:		
				DA	TE		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							<b>-</b>   \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

### ALL OTHER CONTRIBUTIONS

**OVER \$250.00** 

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate		Rep	orting Pe	eriod				
			Fror	rom: To:				
				D	ATE		А	MOUNT
Full Name of Contributor				МО	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		I		Occupa	tion	•		
Employer Mailing Address/Principal Place	e of Business	City		•	State		Zip Cod	le (Plus 4)
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, S				on 3.			P	AGE TOTAL
							\$	0.00

## OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate			Reporting Period						
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.00	
Mailing Address							$\neg$		
City	State	Zip Code (I	Plus 4)						
Receipt Description	•	•			1	•	•		
Futor Coand Total of Bank	Cabadula I Detailed	Commence De	Caatle					PAGE TOTAL	
Enter Grand Total of Part I	e on Schedule I, Detailed	Summary Page,	Section	4.			\$	0.00	

#### **SCHEDULE II**

#### **IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period									
BANTA, JACOB DANIEL	From:	<u>6/7/2022</u> <b>To:</b>	10/24/2022							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR										
TOTAL for the Reporting Pe	eriod (1)	\$	0.00							
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)									
TOTAL for the Reporting Pe	eriod (2)	\$	0.00							
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)										
TOTAL for the Reporting Pe	eriod (3)	\$	0.00							
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00							

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidate	Reporting Period							
	From: To:							
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						<b>~</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•	•	•	•				
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Detai	led Sum	mary Pag	ge,		PAGE TOT	AL
Section 2.						\$		0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate					porting	Period			
	From:					То:			
	DATE							AMOUNT	
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Place of Business City State Zip Cod					Code(Plus 4)	Descri	ption	of Contribution	
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
	From			То:			
				DATE	AMOUNT		
To Whom Paid	мо	DAY	YEAR				
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descrip				
Enter Grand Total of Expenditures of					PAGE TOTAL		
Lines Grand Total Of Expenditures of	ni rage 1, kepoit C	over rage, Item L	<b>,</b> .			\$	0.00