### **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 2022	2C0967				eport		CANI	DIDATE	<b>✓</b>	cc	MMITTEE		LOB	BYIST		
Name of Filing C	ommittee, Candid	late or L	obbyist:		BAI	NTA,	JACO	B DAN	IEL								
Street Address:																	
City:								State:				Zip Code	: 16	441			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE- PRIMARY 2. 30 DAY POS PRIMARY				POST-	3.		AMENDMENT Yes REPORT?			No	٧			
(place X to the right of					POST-	6. <b>X</b>		TERMINATION REPORT?		Yes	No	٧					
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022		FILING METHO ( ) CHECK ON							PAPER		<b>V</b>	DISKE	TTE	
Name of Office S	ought by Candida	te:	•					DATE	OF ELE	CTION		District Number	Office Code	Pai	ty Code	County Code	,
								МО	DAY	YEAR	2		STH	REF	)	25	
REPRESENTATI	VE IN THE GENE	RAL ASS	EMBLY					1	11	8 2	022		(SEE IN:	STRUCTI	ONS FOR O	ODES)	
	Receipts and	МО	DAY	YEAR	2			МО	DAY	YEAR	R.	FOR	OFFIC	CE USE	ONLY		
Expenditures	from:		10 25	2	022	2 <b>T</b>	0	1	l1	28 2	022						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				.00						
B. Total Moneta	ary Contributions	And Rec	eipts (From S	Sche	dul	e I)	\$			0	.00						
C. Total Funds	Available (Sum O	f Lines A	and B)			4	\$	7		0	.00						
D. Total Expend	ditures (From Sch	edule II	I)		4		\$			0	.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)	)		•	\$	$\mathcal{I}$		0	.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	hedu	le I	1)	\$	/		0	.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\ (	\$			0	.00			'			
				AFF	ΊD	AVI	T SE	CTIOI	V								
	a Committee rep		17						•								
I swear (or affirm) correct and comple	that this report, inc ete.	luding the	attached sche	edules	s file	ed on	paper	or by ele	ectronic m	edium, ar	e to t	the best of r	ny knov	wledge	and belie	ef , true	1
Sworn to and subs	cribed before me thi day of	5	20							Sign	ature	e of Person S	Submitt	ting Re	oort		
	Signatu	ire					_					Printe	d Name	•			1
My Commission Ex	pires						_					Email					
	МО	D	AY	YR					Ar	ea Code		Daytime	Teleph	one Nu	mber		╝
Part II- If this is	a report of a can	didate's	authorized C	Comn	nitte	ee, C	andid	ate sha	ll sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	ny knowl	edge and belief	f this	poli	litical	comm	ittee has	not viola	ted any pi	rovis	ions of the a	act of J	une 3,1	937 (P.L	1333,	١
Sworn to and subsc	ribed before me this										s	ignature of	Candida	ate			1
	day of ————————————————————————————————————						_					Printed	Namo				
	Signature						_					- inted	.vanie				
My Commission Exp	_											Email			_		
	МО	D	AY	YR			-		Area	Code		Day	time T	elephor	ne Numb	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

	ctanea Sammary rage				
Name of Filing Committee or Candidate		Reportin	g Period		
BANTA, JACOB DANIEL		From:	10/25/202	<u>2</u> To:	11/28/2022
1. Unitemized Contributions Received - \$ 50.00 or Le	ss Per Contributor				
	TOTAL for the Reporting	Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From	m 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	Period	(2)	\$	0.00
			7	7	
3. Contributions Received Over \$250.00 (From Part C	C and Part D)				
Contributions Received From Political Committees	(Part C)			\$	0.00
All Other Contributions (Part D)				\$	0.00
	TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returne	ed Checks, Etc. (From Part E)				
	TOTAL for the Reporting	Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During totals from Boxes 1,2,3 and 4; also enter this amou	this Reporting Period (Add and int on Page1, Report Cover Pag	l enter am e, Item B	ount .)	\$	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 Candidate			Reporting Period						
			From:		То:				
				DATE		AMOUNT			
Full Name of Contributing Committee			МО	DAY	YEAR				
Mailing Address		_			\$	0.00			
City	State	Zip Code (Plus 4)							

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

**PAGE TOTAL** 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					
			Fro	m:		To	<b>:</b>		
					DATE		AMOUNT		
Full Name of Contributor				мо	DAY	YEAR	1		
Mailing Address						1	\$	0.00	
City	State	Zip Code (Plus 4)	)						

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

**PAGE TOTAL \$** 0.00

#### **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		AMOUNT		
Full Name of Contributing Committee				МО	DAY	YEAR			
Mailing Address					//			0.00	
City	State	Zip Code	e (Plus 4)						
					,		PAGE T	OTAL	
Enter Grand Total of Part C on Sched	ule 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			Reporting Period						
			Fron	n:		То			
				D	ATE		AMOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State Zip Code (Plu								
Employer Name				Occupa	ion		,		
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code (Plus 4	)	
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ummary Page,	Section	on 3.	<b>&gt;</b>	\$	PAGE TOTA	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	Name of Filing Committee or Candidate			Reporting Period						
			From:							
				D	ATE		AMOUN	т		
Full Name				мо	DAY	YEAR	\$	0.00		
Mailing Address										
City	State	Zip Code (	Plus 4)							
Receipt Description							7/			
Enter Grand Total of Part E on Schedu	le T. Detailed Sumn	narv Page	Section	4	,		PAGE TO	DTAL		
The stand rotal of raft Lon Jenedu	.c _, Detanca Summ	, . uge,	Section	<b>W</b>		4	5	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 Per	iod	
BANTA, JACOB DANIEL	From:	<u>10/25/2022</u> <b>To:</b>	11/28/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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** 

		7 7000 10	<b>4</b>				
Name of Filing Committee or Candidate			Reporting	Period			
			From:		1		
				DATE		AMOUNT	
Full Name of Contributor			мо	DAY	YEAR	^	
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:			•				
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	entributions Deta	niled Sumi	mary Pag	ge, \$	PAGE TOT	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate			Re	porting I	Period				
			Fro	om:		То:			
			1		DATE		AMOUNT		
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address						4	0.00		
City	State	Zip Code(Plus 4)							
Employer of Contributor	•	•	Occupation						
Employer Mailing Address/Principal Plac	e of Business	City	Stat	e Zip	Code(Plus 4)	Description of	Contribution		
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kinc	Contributions D	etaile	ed			PAGE TOTAL 0.00		

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reportir	ng Period					
	From			То:					
				DATE	АМ		AMOU	NT	
To Whom Paid			мо	DAY	YEAR				
Mailing Address						<b>S</b>		0.00	
City	State	Zip Code (Plus 4)	Description of Expenditure						
Enter Grand Total of Expenditures o	on Page 1, Report C	over Page, Item D				\$	PAGE TOT	<b>AL</b> 0.00	

