PAGE 1 / 8

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	uthorized Com	mittee	Offi	ce Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT		cample: If typing, typorer the lines.	e 12FE4M5	
LOU ANN FOR CO	NGRESS				ı
ADDRESS (number and street		TTE AVE SUITE 11.	2		
▼ Check if different					
than previously reported. (ACC)	NASHVILLE			TN 372	09
2. FEC IDENTIFICATION	N NUMBER ▼	CITY ▲		STATE ▲	ZIP CODE ▲
C C00519546		3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT TN 06
4. TYPE OF REPORT	,	(b) 12-Day PRE	E-Election Report for	the:	
(a) Quarterly Reports:			Primary (12P)	General (12G)	Runoff (12R)
April 15 Quarte	erly Report (Q1)	П	Convention (12C)	Special (12S)	
July 15 Quarte	erly Report (Q2)		Convention (120)	Special (123)	
October 15 Qu	uarterly Report (Q3)	Election on	M M / D	D / Y Y Y Y	in the State of
January 31 Yea	ar-End Report (YE)	(c) 30-Day POS	ST-Election Report fo	r the:	
			General (30G)	Runoff (30R)	Special (30S)
Termination Re	eport (TER)	Election on		D / Y " Y " Y " Y	in the State of
5. Covering Period	M M / D D /	Y Y Y Y Y 2017	through	M M / D D / Y	Y Y Y 2017
I certify that I have examine Type or Print Name of Treas	Arnold, Thom		nowledge and belief	it is true, correct and co	mplete.
Signature of Treasurer	Arnold, Thomas, C., ,		[Electronically Filed]	Date 10	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, e	erroneous, or incomple	te information may	subject the person siç	gning this Report to the pe	enalties of 52 U.S.C. §30109
Office Use Only				F	FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2/8

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
LOU ANN FOR CONGRESS

 Debts and Obligations Owed BY the Committee (Itemize all on

Schedule C and/or Schedule D).....

2017 2017 09 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 117791.03 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 2500.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 115291.03 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 344850.36 (from Line 17) (b) Total Offsets to Operating 1687.65 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 343162.71 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 128.32 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

For further information contact:

228000.00

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 05/2016) Write or Type Committee Name

LOU ANN FOR CONGRESS

Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 0.00 (i) Itemized (use Schedule A)..... 117791.03 0.00 (ii) Unitemized (iii) TOTAL of contributions 0.00 117791.03 from individuals

2017

09

30

(b) Political Party Committees	0.00	,
(c) Other Political Committees (such as PACs)	0.00	,
(d) The Candidate(e) TOTAL CONTRIBUTIONS	0.00	- 7

07

01

12. TRANSFERS FROM OTHER		
AUTHORIZED COMMITTEES	0.00	0.00

	AUTHORIZED COMMITTEES
13.	LOANS:

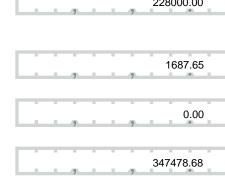
LOANS:		
(a) Made or Guaranteed by the Candidate	0.00	228000.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	228000.00

0.00

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

16.	TOTAL RECEIPTS (add Lines														
15.	OTHER RECEIPTS (Dividends, Interest, etc.)		_	7			7	Ξ	Ī	0.00	С.	Ī	7	_	Ξ
	(Refunds, Rebates, etc.)	L	_	7	_	_	7		_	0.00	L.	-	7	_	_

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



PAGE 3 / 8

2017

0.00

0.00

0.00

117791.03

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4/8 **COLUMN A COLUMN B** II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 0.00 344850.36 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other 0.00 2500.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs) TOTAL CONTRIBUTION REFUNDS 0.00 2500.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 0.00 347350.36 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 128.32 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 0.00 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 128.32 25. SUBTOTAL (add Line 23 and Line 24)..... 0.00 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 128.32 (subtract Line 26 from Line 25).....

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

PAGE 5 OF FOR LINE NUMBER: **x** 13a (check only one)

8

13b Transaction ID: SC/10.4109 NAME OF COMMITTEE (In Full) LOU ANN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary ZELENIK, LOU ANN, , , General Mailing Address 2620 SEQUOYA TRACE Other (specify) \blacktriangledown State ZIP Code City X Personal Funds of the Candidate TN 37127 **MURFREESBORO** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 15000.00 0.00 15000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D31 D M 05M Ž01Ž Y01/01/2020 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 15000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE OF FOR LINE NUMBER: **x** 13a (check only one)

8

13b Transaction ID: SC/10.4111 NAME OF COMMITTEE (In Full) LOU ANN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary ZELENIK, LOU ANN, , , General Mailing Address 2620 SEQUOYA TRACE Other (specify) \blacktriangledown State ZIP Code City X Personal Funds of the Candidate TN 37127 **MURFREESBORO** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 200000.00 0.00 200000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D29^D M 06M Ž01Ž Y01/01/2020 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 200000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE OF FOR LINE NUMBER: **x** 13a (check only one)

8

13b Transaction ID: SC/10.4112 NAME OF COMMITTEE (In Full) LOU ANN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary ZELENIK, LOU ANN, , , General Mailing Address 2620 SEQUOYA TRACE Other (specify) \blacktriangledown State ZIP Code City X Personal Funds of the Candidate TN 37127 **MURFREESBORO** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 8000.00 0.00 8000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D ^M80^M Ž01Ž Y12/31/2022 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 8000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

PAGE OF FOR LINE NUMBER:

8

for each category of the **x** 13a (check only one) Detailed Summary Page 13b Transaction ID: SC/10.4113 NAME OF COMMITTEE (In Full) LOU ANN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary ZELENIK, LOU ANN, , , General Mailing Address 2620 SEQUOYA TRACE Other (specify) \blacktriangledown State ZIP Code City X Personal Funds of the Candidate TN 37127 **MURFREESBORO** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D21 ^D ^M80^M Ž01Ž Y12/31/2023 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... 228000.00

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