To whom it may concern,

RECEIVED

I have tried to input report electronically but have had no success.

I did not want to be late in filing and decided to mail this out immediately.

I hope to have this resolved by next quarter report.

Thank you for your help with this matter.

Carlos Thillet Treasurer Peter Vivaldi for Congress

2014 JU	IL 23	АЙ	9:04
FEC	MAKL	CEI	NTE R

¢

FEC AND DIS	OF RECEIPTS SBURSEMENTS Authorized Committee		RECEIVED JUL 23 AM 9: 04
1. NAME OF TYPE OR PRIN COMMITTEE (in full)	► Example: If typing, ty over the lines.	20	C MAIL CENTER
PETER VINAADI FO	RR CONGRESS		┶╺┷╼╄╼┸╶┚╺┚╺┸
	LAKE WABERH	LIGG ROAX	
Check if different than previously reported. (ACC) $Q_{R_1L_1A_1}$	120		2822-
2. FEC IDENTIFICATION NUMBER \checkmark C 0054653/		STATE AMENDED	ZIP CODE STATE ▼ DISTRIC
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) X July 15 Quarterly Report (Q2) 	(b) 12-Day PRE -Election Report fo Primary (12P) Convention (12C)	General (12G) Special (12S)	
October 15 Quarterly Report (Q3) January 31 Year-End Report (YE)	Election on (c) 30-Day POST -Election Report	for the:	in the . State of
Termination Report (TER)	General (30G) MM / D Election on	Runoff (30R) D / Y Y Y Y	Special (30S) in the State of
5. Covering Period $\mathcal{O} \mathcal{I} \mathcal{I} \mathcal{O} \mathcal{I}$	ŽŎĬŸ through	06'30'ž	ŏ / 4
Signature of Treasurer	eus A. Thille	Date 07	15' 2014
NOTE: Submission of false, erroneous, or incompl Use Only FE5AN018	ete information may subject the person		FEC FORM 3 (Revised 02/2003)

e1

 	FEC Form 3 (Revised 02/2003)	SUMMARY PAGE of Receipts and Disbursements	Page 2
W	rite or Jupe Committee Name	FOR Congress	
Re	aport Covering the Period: From: 0	₩ ° ° 1 ´ ž ~) ¥ то:	06'30'2014
		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)	······································	<u> </u>
	(a) Total Contributions (other than loans) (from Line 11(e))	5,466.00	, 33,952.00
	(b) Total Contribution Refunds (from Line 20(d))	, g g g g	, ,600.00
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	, 5,466.00	, 33,35200
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	, 12,836.00	, 39,6/8.07
	(b) Total Offsets to Operating Expenditures (from Line 14)	9.9.•	s
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	, 12,83600	, 39,6/807
8.	Cash on Hand at Close of Reporting Period (from Line 27)	, 1,583.93	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	- 1 1 . 9 9 ●.	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	- · · · · · · · · · · · · · · · · · · ·	

For further information contact:

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

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

FE5AN018

1403-128-0078

	-		
	DE	TAILED SUMMARY PAGE	
	FEC Form 3 (Revised 12/2003)	of Receipts	Page 3
W	Vrite or Type Committee Name	FOR CONGRESS	
_	PETER VIVALDI	FOR CONCRESS	
R	Report Covering the Period: From:		06'30'2014
	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)	, 5.466.00	30,136.00
	(ii) Uniternized		, 3,8/6.00
	(iii) TOTAL of contributions		
	from individuals	, 5,466.00	, 33,95200
	(b) Political Party Committees	ŝ 9 •	9 9 *
	(c) Other Political Committees (such as PACs)	5 g •	
	(d) The Candidate	9 9 •	
	(e) TOTAL CONTRIBUTIONS (other than loans)	. 7 7 -	9 9 •
	(add Lines 11(a)(iii), (b), (c), and (d))	, 5,466.00	, 33,95200
12.	TRANSFERS FROM OTHER		
	AUTHORIZED COMMITTEES	3 9 °	
13.	LOANS:		
	(a) Made or Guaranteed by the Candidate	7.850.00	, 7,85000
		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(b) All Other Loans (c) TOTAL LOANS	, , , , , , , , , , , , , , , , , , , ,	9 9. ° . ° .
	(add Lines 13(a) and (b))	, 7,850.00	, 7,850.00
14.	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	3 g • .	
15	OTHER RECEIPTS		· · ·
	(Dividends, Interest, etc.)	9 9 "	9 5 "
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)		
	(Carry Total to Line 24, page 4)	, /3,3/6.00	, 41,802.00

:

1

- - - -

	FEC Form 3 (Revised 02/2003)	of Disbursements	Page 4
	II. DISBURSEMENTS	COLUMN A Total Thie Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	, 12,836.00	, 39,6/8.07
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	9 9 •	, 7 9 •
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	ş 9 °	; 5 9 °
	 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)) 	9. 5 °. 	79°
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees	3 9 °	, ,600,00
	 (b) Political Party Committees (c) Other Political Committees (such as PACs) 	9 1 •	9 g •
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	3	, ,600.00
21.	OTHER DISBURSEMENTS		∴ ∳ g •
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	, 12,836.00	, 40.218.07

- ----

ī

İ

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	, 1,103.93
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	, 13,3/6.00
25. SUBTOTAL (add Line 23 and Line 24)	, 14,419.93
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	, 12,836.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	, 1,583.93

FE5AN018

1408 - 128 - 0080

٠

.

FOR LINE NUMBER: PAGE OF SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c 11d **Detailed Summary Page** 12 13a 13b 14 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) 191855 Full Name (Last, First, Middle Initial) GU Er OA oDola Date of Receipt Mailing Address 04 22 2014 00 Zip Code 00969 UA FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. 500,00 Name of Employer Occupation Sel Owher **Receipt For** Election Cycle-to-Date Primary General ,50000 Other (specify) 3 Full Name (Last, First, Middle Initial) ODRIGUEZ Date of Receipt Josye B. Mailing Address 2014 City State Zip Code 07052 FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. 25000 Name of Employer Occupation ASTOR ゞ゙゙゙゙゠゚゚゚゚レト **Receipt For:** Election Cycle-to-Date Primary General 250,00 Other (specify) Full_Name (Last, First, Middle Initial) -jqyeroa Date of Receipt Jose Malling Address 24 2014 ô4 e Mon 07 State Zip Code 3282 RLANDO FEC ID number of contributing С federal political committee. Amount of Each Receipt this Period 275,00 Name of Employer Occupation 5EL EALTOR **Receipt For Election Cycle-to-Date** Primary General Other (specify) 275.00 ę SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)

PAGE OF FOR LINE NUMBER: SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c 11d **Detailed Summary Page** 12 139 13b 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) Pr ONGress Middle Initial) Full Name last. reri Date of Receipt A Mailing Address M M 1 0 0 '3 04 20/4 23 City Zip Code State 32807 4α \cap FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. ,300.00 Name of Employer, Occupation/ VWDER **Receipt For:** Election Cycle-to-Date Primary General 300.00 Other (specify) **5** . Full Name (Last, First, Middle Initial) GUS QUILES Date of Receipt B. Mailing Address 1 M Þ 399 ЮŃ en'Y C (~ Pe 20 City State Zip Code F2 rmon -<u></u>₹ (171 FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. Name of Employer Occupati 200.00 2 · 3 SELF **Receipt For:** Election Cycle-to-Date Primary Generat Other (specify) ,200.00 5 Full Name (Last, First, Middle Initial) esnond Date of Receipt YEOR Addine 63 0 n Drire tone 54 .O¥ Zip Code City 32828 4nd o FEC ID number of contributing С federal political committee. Amount of Each Receipt this Period 300.00 Name of Employer Occupation oster Are TAPAGER 0 Receipt For: Election Cycle-to-Date Primary General Other (specify) , 300.00 ; SUBTOTAL of Receipts This Page (optional)..... TOTAL. This Period (last page this line number only).

FOR LINE NUMBER: PAGE OF SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c 11d **Detailed Summary Page** 12 13a 13b 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) Pr 191855 Full Name (Last,/First, Middle Init RNA eZ Date of Receipt A. Mailing Address ١. NS. 1 D -1 HC City State Zip Code 201 2) 786 P ne 11 FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. ,700.00 Name of Employer Occupation **Receipt For:** Election Cycle-to-Date Primary General Other (specify) ,700 00 :. Full Marpe (Last, First, Middle Initial Rene Asencia Date of Receipt B. Mailing Address, 1A 7 D D 91 1310 SAW 2 2014 State Zip Code Ø 3<u>2</u>825 ANDE FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. ; 200 00 Name of Employer Occupation . . . Om O ELI Receipt For. **Election Cycle-to-Date** X Primary General Other (specify) : 200.00 5 Full Name/(Last, First, Middle Initial) Date of Receipt Arlos Mailin 0 P A. 3 Cit Zip Code 28 FEC ID number of contributing С federal political committee. Amount of Each Receipt this Period ,200,00 Name of Employer Occupation ONG e/ Receipt For: Election Cycle-to-Date Primary General Other (specify) ,300.00 ţ SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only).

FOR LINE NUMBER: PAGE OF SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) for each category of the 11a **ITEMIZED RECEIPTS** 11b 11c 11d Detailed Summary Page 12 134 13b 14 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) P DAGTESS er Full Name (Last, First, Middle Initial) ehan PUIN Date of Receipt Mailing Address M 64 / ס D ive orola 2014 City State 2 Zip Code 2828 And °Ο F, FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. , 200,00 Name of Employer Occupation BC DUN CRANGE (Receipt For: Election Cycle-to-Date Primary General Other (specify) ,200.00 1. Full Name (Last, First, Middle Initial) -00 Date of Receipt O. S R. Mailing Address 7 D `D м 0 rl/ e 6 712 22 Zip Code 20 City State æ) 34786 nalmere FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. ,37,5.00 Name of Employer Occupation . . . 7LF Receipt For: Election Cycle-to-Date Primary General , 375.00 Other (specify) 5 Full Name (Last, First, Migdle Initial) M ndrew Date of Receipt AYMON Mailing Addr (a M 0 ire 8 State Zip Code 04 8 2 20 4786 3 dermere I N FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. Name of Employer Occupation , 401.00 C 1~ner 761 F Receipt For: Election Cycle-to-Date Z Primary General Other (specify) ,401.00 5 SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only).

PAGE OF FOR LINE NUMBER: SCHEDULE A (FEC Form 3) (check only one) Use separate schedule(s) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c 111 **Detailed Summary Page** 12 126 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) 191855 Middle Initial Full Name First Date of Receipt Mailing Add M м 1 D D ne Koal 81 04 City State Zip Code 20 82 FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. , 200.00 Name of Employer Occupation bbe ΓΥ Receipt For: Election Cycle-to-Date Primarv General Other (specify) ,200.00 ۶. Full Name (Last, First, Middle Ipitial ecuni Date of Receipt Mailing Address M M n `n Cour 9 10 30 2014 06 State City Zip Code 3 28. FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. 170.00 Name of Employer Occupation. E EL Receipt For: Election Cycle-to-Date Primary General Other (specify) , 170.00 5 Full Name (Last, First, Midgle Initial) 11e Se Date of Receipt Mailing Address Roa d A.1 , • 2 0 State Zio Code 2 **2**€ 19 FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. 19 00 Name_of Employer Occupation RICE NB .rea Receipt For: Election Cycle-to-Date Primary General Other (specify) , 195.00 ; SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number only).

FOR LINE NUMBER: PAGE OF SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a (116 11c 11d Detailed Summary Page 12 13a 13b 14 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) er 19rCSS Full Name (Last, First, Middle Initial) Derrios ינגנ Date of Receipt Mailing Address M M / D pres aron Z een State Citv Zio Code nlo 2 32 FZ コン FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. , 1.000.00 In Kind Campaign Signs Name of Employer Occupation. いうハール Receipt For: Election Cycle-to-Date Primary General Other (specify) 1:000.00 ÷., Full Name (Last, First, Middle Initial) Date of Receipt B. Mailing Address M M / D D 1.8 City State Zio Code FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. Name of Employer Occupation . • • 5 . e Receipt For: Election Cycle-to-Date General Primary Other (specify) 5 · 5 Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 1 0 63 n State City Zip Code FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. Name of Employer Occupation 5 g. ... Receipt For. Election Cycle-to-Date Primary General Other (specify) 3 5 SUBTOTAL of Receipts This Page (optional)..... 466.00 TOTAL This Period (last page this line number only) ..

PAGE OF FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the ITEMIZED DISBURSEMENTS 19b 17 18 19a **Detailed Summary Page** 20b 20c 21 20a 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 Fuji) IVALD! hor (ress DIG Full Name (Last, First, Middle Initial) Date of Disbursement Bernios A. MAnn 06 10 2014 Mailing Address City State Zip Code Amount of Each Disbursement this Period 100000 Purpose AMDA Candidate Category/ Type Office Sought: House Disbursement For Primary Senate General President Other (specify) District: 09 State: Middle Initial) Full Name Date of Disbursement В. 04 20 2014 Mailing Address City Zip Code State Amount of Each Disbursement this Period 2828 Purpose 200,00 ON Candidate Category/ Type Office Sought House Disbursement For: Senate Primary General President Other (specify) State: District: 09 Full Middle Initial) Date of Disbursement C. FA 04 29 2014 Maili 500 5. Bronough St. Zip Code fate Amount of Each Disbursement this Period 2399 Purp 10.440.00 Candid Category/ Туре Disbursement For. Office Soual House Primary Senate General President Other (specify) G State: District: 🕖 SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)

PAGE OF FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **ITEMIZED DISBURSEMENTS** 17 18 19a 19b **Detailed Summary Page** 20a 20b 20c 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 Fuji) For Congress VALDI Full Name Middle Initial Date of Disbursement A. M ы , D D / Y Mailing Address 02 2014 Into OF OH City State Zip Code Amount of Each Disbursement this Period -1 786 ろン ,71600 Purpose of Disbursement ņ Keim 61. hu I Candidate Name Category/ Type Office Sought: House 1 UTSA ment For: Senate Primary General President Other (specify) District 09 State: Full Name Middle Initial) First. Date of Disbursement В. **8**.5 56 1 Mailing Addre 20 Ũ 06 als City State Code Amount of Each Disbursement this Period SSIMMER C 240,00 Purpose of Disbursement DONS :VEn **Candidate Name** Category/ Туре Office Sought House **Disbursement For:** Z Primary Senate General Other (specify) President District: 🕖 State: Full Name (Last, First, Middle Initial) Date of Disbursement C. Suparvisord oun ec 55 8.5 . n. ັກ , Mailing Address Mansha D 25709 \mathbf{z} 150n Zip Code State City Amount of Each Disbursement this Period sinn e e 30 Purp of Dishursement 1800 bsen Candidate Name Category/ Type Office Sought **Disbursement For:** House Senate **Z** Primary General President Other (specify) State: District SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)

403-128-0088

FESAN018

	F			
CHEDULE B (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE OF (check only one)		
TEMIZED DISBURSEMENTS	for each category of the			
	Detailed Summary Page	20a $20b$ $20c$ 21		
Any information copied from such Reports and Stateme	nts may not be sold or used by any	ومساوحيا ومستعش المساوي ومنافعته ويستعونها والمستعوبها		
r for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
Poter Vival Di F	or Congress			
Full Name (Last, First, Middle Initial)				
EAST Side Regiona	1 Aab Wob	Date of Disbursement		
Mailing Address 376 N, Cer	Itral Are.	06 23 2014		
City Oviedo #	L Zip Code 32765	Amount of Each Disbursement this Period		
Purpose of Disburgement + Sponso	rahip	, , 725.00		
Candidate Name Perfet Vi	VA di Category Type	1		
Office Sought: K House Disburseme				
	imary General her (specify)			
State: FL District: 09				
Full Name (Last, First, Middle Initial)		Date of Disbursement		
h.				
Mailing Address				
City Str	te Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement				
Candidate Name	Category Type	1		
Office Sought: House Disburseme				
Senate Pi	imary 🗌 General			
	ther (specify)			
State: District:				
Full Name (Last, First, Middle Initial)		Date of Disbursement		
•				
Mailing Address		——————————————————————————————————————		
City State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement				
Candidate Name	Categor			
	Type	*]		
Office Sought: House Disburseme	nt For.			
	imary General			
President	ther (specify)	ł		
State: District:				
State: District:				
		, , , , , , , , , , , , , , , , 		
State: District:				

Ì

TERMS Date Incurred Date Due Interest Rate Secur 04'25'2014'11'04'2014 00000 % (apr) 0 0 0 0 0		orm 3)			PAGE O
Detailed softmary rege Detailed softmary rege AME OF Community For Community For Community AME OF Community For Community For Community Detailed softmary Control Detailed softmary Control Original Amount of Loan Curred Date Incurred Date Incurred Date Incurred Date Outer of Guarantors (if any) to Loan Source I. Full Name (Last, First, Middle Initia) Name of Employer Mailing Address Occupation Amount Curred State Date Incurred Date Incurred Date Incurred Occupation Amount of Employer Mailing Address Occupation Amount Current first, Middle Initi	-	onn og		for each category of the	1 5
Peter Vivald, For Onypess LOAN SOURCE Full, Name (Last, First, Middle Initial) Vivald, Peter A. Mailing Address City City State ZIP Code Winderner State ZIP Code Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of 7,8500 800,0000 7,8500 800,0000 7,8500 800,0000 84 2.5' 2014 94 2.5' 2014 94 2.5' 2014 94 2.5' 2014 94 3.5' 2014 94 3.5' 2014 954 2.5' 2014 954 3.5' 2014 954 3.5' 2014 954 3.5' 2014 954 3.5' 2014 954 3.5' 2014 954 3.5' 2014 954 3.5' 2014 954 3.5' 2014 954 3.5' 2014 954 3.5' 2014 954 3.5' 2014				Detailed Summary Page	
Vivaldi, Peter A. Bitter General Mailing Address City Cite City State ZIP Code City State State Criginal Amount of Lean Cumulative Payment To Date Balance Outetanding at Close of 7,8500 \$000,0000 7,855 TERMS Date Incurred Date Due Interest Rate Secur 24'2.5'2.0'14'7'7'2.04'2.0'14'000000 % (apr)	Peter	Vivald;		-ONG ress	
G7/3 Thornhill Circle City State ZIP Code Originel Anount of Loan Cumulative Payment To Date Balance Outstanding at Close of Originel Anount of Loan Cumulative Payment To Date Balance Outstanding at Close of 7.85000 000,000,00 7.855 TERMS Date Incurred Date Due Interest Rate Secur 04/25/25/2014 11/204/2014 00000 % (apr)	Vivaldi,		a) 4.	1	Primary
Winderner FL 34/786 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of 7,8500 000,0000 7,850 TERMS Date Incurred Date Due Interest Rate Secur 04/25/25/2014 19/9/204/2014 000,000 % (apr) V List All Endorsers or Guarantors (if any) to Loan Source Name of Employer V 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed Outstanding: ; 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Mailing Address Occupation Amount Guaranteed Outstanding: ; ; 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount City State ZIP Code Outstanding: ; ; . Mailing Address Occupation Amount Amount Amount . City State ZIP Code Outstanding: ; .	Mailing Address			L _	Other (specify) ▼
7,85000 \$00,000,000 7,857 TERMS Date Incurred Date Due Interest Rate Secur $D44' 25' 2014' 100,000 % (apr) $04' 2014' 000,000 % (apr) $04' 100,000 % (apr) $000,000 % (apr) $	1 1 4		ZIP Code	#786	
TERMS Date Incurred Date Due Interest Rate Secur \ddot{O} \ddot{A}' $\ddot{2}$ \ddot{O} \ddot{A}' \ddot{D} \ddot{A}' D	Original Amount of Loan	Cumu	lative Payment To D	ate Balance	Outstanding at Close of Th
Date Incurred Date Due Interest Rate Secur 0 4 2 5 2 0 1 4 1 0 0 0 0 % (apr) 0 4 2 0 1 4 0 0 0 0 % (apr) 0 7 List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outeranting: 1 Value State ZIP Code Occupation Amount City State ZIP Code Occupation Amount City State ZIP Code Occupation Amount Mailing Addrese Occupation Amount Guaranteed Ottamamed Occupation Amount Guaranteed Outetanding: , , . . S. Full Name (Last, First, Middle Initial) Name of Employer . . Mailing Address Occupation Amount . . Guaranteed Outetanding: , . . . List Nime (Last, First, Middle Initial) Name of Employer . . . Ma	, 7,8	5000	,0 <i>0 D</i> ,0	000.00	, 7,850
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 Quaranteed Outstanding: , Value State ZIP Code Outstanding: , , 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Quaranteed Outstanding: , Oits State ZIP Code Quaranteed Outstanding: , Outstanding: , , S. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Arnount Guaranteed Outstanding: Y State ZIP Code Guaranteed Outstanding: ; Y State ZIP Code Guaranteed Outstanding: ; Occupation Arnount Guaranteed	TERMS Date Incurred		Date Due	Interest Rate	Secured:
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 Quaranteed Outstanding: , Value State ZIP Code Outstanding: , , 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Quaranteed Outstanding: , Oits State ZIP Code Quaranteed Outstanding: , Outstanding: , , S. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Arnount Guaranteed Outstanding: Y State ZIP Code Guaranteed Outstanding: ; Y State ZIP Code Guaranteed Outstanding: ; Occupation Arnount Guaranteed			04 20		0 % (apr)
1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Outstanding: , 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Mailing Address Occupation City State ZIP Code Mailing Address Occupation Amount Guaranteed Outstanding: , 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding: ; 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Guaranteed Outstanding: ; Octupation Amount Gity State ZIP Code Outstanding: ; ; State ZIP Code Guaranteed				· · · · · · · · · · · · · · · · · · ·	Yea
City State ZIP Code Outstanding: , , , , , , , , , , , , , , , , , , ,				Name of Employer	
City State ZIP Code Guaranteed Outstanding: ; ; 2. Full Name (Last, First, Middle Initial) Name of Employer Name of Employer Mailing Addrese Occupation Amount Guaranteed Outstanding: ? ; ; City State ZIP Code Outstanding: ? ; ; S. Full Name (Last, First, Middle Initial) Name of Employer Occupation Amount Guaranteed Outstanding: ; ; ; Mailing Address Occupation Amount Guaranteed Outstanding: ; ; ; 4. Full Name (Last, First, Middle Initial) Name of Employer . . Mailing Address Occupation . . Mailing Address Occupation . . Mailing Address Occupation . . City State ZIP Code Occupation . SubtrotALS This Period This Page (optional) State ZIP Code . .	Mailing Address			Occupation	
City State ZIP Code Guaranteed Outstanding: ; ; 2. Full Name (Last, First, Middle Initial) Name of Employer Name of Employer Mailing Addrese Occupation Amount Guaranteed Outstanding: ? ; ; City State ZIP Code Outstanding: ? ; ; S. Full Name (Last, First, Middle Initial) Name of Employer Occupation Amount Guaranteed Outstanding: ; ; ; Mailing Address Occupation Amount Guaranteed Outstanding: ; ; ; 4. Full Name (Last, First, Middle Initial) Name of Employer . . Mailing Address Occupation . . Mailing Address Occupation . . Mailing Address Occupation . . City State ZIP Code Occupation . SubtrotALS This Period This Page (optional) State ZIP Code . .		•	Ŀ	Amount	
2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Guaranteed Outstanding: , 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Mailing Address Occupation City State ZIP Code Mailing Address Occupation Amount Guaranteed Outstanding: ; 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed Outstanding: ; 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Mailing Address Occupation State ZIP Code Guaranteed Outstanding: ; ; State ZIP Code Guaranteed Outstanding: ; ; Subtrotals This Period This Page (optional)	City	State ZIP	Code	Guaranteed	· · · · · ·
City State ZIP Code Guaranteed Outstanding: , , 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding: , Amount Guaranteed Outstanding: , Amount Guaranteed Outstanding: , 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Mailing Address Occupation State ZIP Code Quaranteed Outstanding: , , State ZIP Code Quaranteed Outstanding: , , State ZIP Code Quaranteed Outstanding: , , SubtrotALS This Period This Page (optional)	2. Full Name (Last, First, Mi	ddle Initial)		······	
City State ZIP Code Guaranteed Outstanding: , , 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding: , Amount Guaranteed Outstanding: , Amount Guaranteed Outstanding: , 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Mailing Address Occupation State ZIP Code Quaranteed Outstanding: , , State ZIP Code Quaranteed Outstanding: , , State ZIP Code Quaranteed Outstanding: , , SubtrotALS This Period This Page (optional)	Mailing Address			Occupation	
City State ZIP Code Guaranteed Outstanding: , , 3. Full Name (Last, First, Middle Initial) Name of Employer Name of Employer Mailing Address Occupation Amount Guaranteed Outstanding: , , City State ZIP Code Outstanding: , , 4. Full Name (Last, First, Middle Initial) Name of Employer Occupation Mailing Address Occupation Amount Guaranteed Outstanding: , , City State ZIP Code Occupation , , Mailing Address Occupation Amount Guaranteed Outstanding: , , , SUBTOTALS This Period This Page (optional) State ZIP Code Outstanding: , ,			Ļ		
Outstanding: y 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Outstanding: Variation Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Mailing Address Occupation State ZIP Code Mailing Address Occupation State ZIP Code Outstanding: ' Mailing Address Occupation	<u></u>	State 71D			
Mailing Address Occupation City State ZIP Code Guaranteed Outstanding: 1 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Mailing Address Occupation SUBTOTALS This Period This Page (optional)	City				· 9
City State ZIP Code Amount Guaranteed Outstanding: 1 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Guaranteed Outstanding: 1 Outstanding 1 1 Mailing Address Occupation 0 Substrated Outstanding: 1 Substrates This Period This Page (optional) 0		ddle Initial)			
City State ZIP Code Guaranteed Outstanding: : 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Guaranteed Outstanding: Amount Guaranteed Outstanding: , SUBTOTALS This Period This Page (optional) State Substantian Substantian	3. Full Name (Last, First, Mi	•		Name of Employer	
4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Guaranteed Outstanding: , SUBTOTALS This Period This Page (optional)					
Mailing Address Occupation City State ZIP Code Guaranteed Outstanding: , SUBTOTALS This Period This Page (optional)	Mailing Address			Occupation Amount	
City State ZIP Code Amount Guaranteed Outstanding: , SUBTOTALS This Period This Page (optional)	Mailing Address		Code	Occupation Amount Guaranteed	
City State ZIP Code Guaranteed Outstanding: , , SUBTOTALS This Period This Page (optional)	Mailing Address City	State ZIP	Code	Occupation Amount Guaranteed Outstanding:	y
Outstanding: ' ' '	Mailing Address City 4. Full Name (Last, First, Mi	State ZIP	Code	Occupation Amount Guaranteed Outstanding: 7 Name of Employer	ý
	Mailing Address City 4. Full Name (Last, First, Mi Mailing Address	State ZIP ddle Initial)	Code	Occupation Amount Guaranteed Outstanding: ? Name of Employer Occupation Amount	ý •
> S	Mailing Address City 4. Full Name (Last, First, Mi Mailing Address	State ZIP ddle Initial)	Code	Occupation Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed	
TOTALS This Period (last page in this line only)	Mailing Address City 4. Full Name (Last, First, Mi Mailing Address City	State ZIP ddle Initial) State ZIP	Code	Occupation Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding:	9



ow it was received.
Date of Receipt
Postmarked 7/16/14
Postmarked (R/C)
Postmarked
Postmarked
Shipping Date
a Day Delivery
Date of Receipt
Date of Receipt
Date of Receipt
eceipt or Postmarked
7/23/14 DATE PREPARED