Image# 12963716080 PAGE 1 / 14

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

		monzea committe			Office Use Only
NAME OF COMMITTEE (in full)	YPE OR PRINT ▼	Example: If typir over the lines.	ng, type	12FE4M5	
CAMPAIGN FOR PRIMA	ARY ACCOUNTAB	BILITY INC		<u> </u>	
ADDRESS (number and street)	3900 ESSEX LANE SUITE	250			
Charle if different					
Check if different than previously reported. (ACC)	HOUSTON			TX _	77027
2. FEC IDENTIFICATION NUM	IBER ▼ CI	TY▲	5	STATE A	ZIP CODE ▲
C C00502849			NEW OR	× AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb	20 (M2)	May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Ma		Jun 20 (M6)	H	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)		Primary (12P	Jul 20 (M7)	General (	20 (M10) Jan 31 (YE) 12G) Runoff (12R)
July 15 Quarterly Report (Q2)	PRF-Election	Convention (	_	Special (	
October 15 Quarterly Report (Q3)		M M /	D D /	Y   Y   Y   Y	in the
January 31 Year-End Report (YE)	Election				in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day  POST-Election  Report for the:	X General (300	G)	Runoff (3	OR) Special (30S)
Termination Report (TER)	Election	on on 11	06	2012	in the State of
5. Covering Period 10	18 2012	through	M M	/ D D /	2012
I certify that I have examined this	Report and to the best of	f my knowledge and b	pelief it is tru	e, correct and	I complete.
Type or Print Name of Treasurer	Jonathan Martin				
Signature of Treasurer Jonatha.	n Martin	[Electronically	Filed] D	ate 12	07 / 2012
NOTE: Submission of false, erroneou	us, or incomplete information	on may subject the pers	son signing th	is Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3X Rev. 12/2004

#### **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

		COLUMN A	COLUMN B
		This Period	Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2012		1673194.29
	(b) Cash on Hand at Beginning of Reporting Period	402947.70	
	(c) Total Receipts (from Line 19)	300.00	1817689.48
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	403247.70	3490883.77
7.	Total Disbursements (from Line 31)	3576.09	3091212.16
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	399671.61	399671.61
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	390000.00	

#### For further information contact:

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 06/2004)

Write or Type Committee Name

### CAMPAIGN FOR PRIMARY ACCOUNTABILITY INC

t Covering the Period: From: 10	18 2012 To:	11 26 2012
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	300.00	1344322.00
(i) Itemized (use Schedule A)	7	7 7 7
(ii) Unitemized	0.00	17335.08
Lines 11(a)(i) and (ii)	300.00	1361657.08
Political Party Committees	0.00	0.00
(such as PACs)	0.00	0.00
	300.00	1361657.08
ty Committees	0.00	0.00
Loans Received	0.00	390000.00
n Repayments Received	0.00	0.00
sets To Operating Expenditures		
funds, Rebates, etc.)		
1 2 1	0.00	66032.40
	0.00	0.00
·		0.00
·	0.00	0.00
	0.00	0.00
(Horr defleatile 110)	0.00	0.00
Levin Funds (from Schedule H5)	0.00	0.00
Total Transfers (add 18(a) and 18(b))	0.00	0.00
	Intributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	Intributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B
Operating Expenditures:	Iotai Illis Fellou	Calendar Year-to-Date
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	3576.09	1194710.16
Expenditures	3370.09	1134710.10
(add 21(a)(i), (a)(ii), and (b))▶	3576.09	1194710.16
Transfers to Affiliated/Other Party		
Committees	0.00	0.00
Contributions to Federal Candidates/Committees		
and Other Political Committees	0.00	80000.00
Independent Expenditures	0.00	1816502.00
(use Schedule E)  Coordinated Party Expenditures	0.00	1010002.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(222-2310000-1)		
Loan Repayments Made	0.00	0.00
_		
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other	0.00	0.00
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
	· ·	
(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements	0.00	0.00
Other biobardernente	0.00	
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	7
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	7 7 7	
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	3576.09	3091212.16
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	3576.09	3091212.16

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	300.00	1361657.08
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	300.00	1361657.08
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	3576.09	1194710.16
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	66032.40
8. Net Operating Expenditures (subtract Line 37 from Line 36)	3576.09	1128677.76

**1mage# 12963716085** PAGE 6 / 14

#### : 97 A = G7 9 @ G5 B9 CI G'H9 LHF9 @ 5 H98 'HC '5 F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F3XA
Transaction ID:

Also pertaining to the misinformation we received on November 1st, the committee was not aware it was required to file the 30 day post-general report. However after getting correct information from another analyst, we are now filing this report accordingly.

Form/Schedule: Transaction ID:

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

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

F	OR	LINE	NU	MBER	:	PAGE	7	OF	14
(c	he	ck only	or	ne)					
	X	11a		11b		11c	12		
		13		14		15	16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) CAMPAIGN FOR PRIMARY A	ACCOUNTABILITY INC	
Full Name (Last, First, Middle Initial)  A. Ronald R. Cherry  Mailing Address 304 Wright St.		Date of Receipt
City	State Zip Code	11 02 2012 Transaction ID : SA11AI.5565
Sweetwater	TN 37874	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Self	Occupation Physician	Individual contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  800.00	
Full Name (Last, First, Middle Initial)  3. Ronald R. Cherry  Mailing Address 304 Wright St		Date of Receipt
Mailing Address 304 Wright St.  City	State Zip Code	11 20 2012
Sweetwater	TN 37874	Transaction ID : SA11AI.5566  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Self	Occupation Physician	Individual contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  900.00	
Full Name (Last, First, Middle Initial)  C. Loretta Christian		Date of Receipt
Mailing Address 24 Erik Drive		10 23 / Y Y Y Y Y Y
City Angleton	State Zip Code TX 77515	Transaction ID : SA11AI.5551  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	Individual contribution
Advantage Sales and Marketing	Merchandiser	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional).		300.00
	per only)	300.00

#### S 17

S	CHEDULE B (FEC Form 3X)			T FOR LINE	R LINE NUMBER: PAGE 8 OF				
	EMIZED DISBURSEMENTS	Use separate s		(check only	_		LIA	GL U	OF 14
• •	LIVIIZED DISBURSEIVIEN IS	for each categ		X 21b	22	23	24	25	<u>26</u>
		Detailed Sumn	iary Page	27	28a	28b	28c	29	30b
Ar	ny information copied from such Reports and Staten	nents may not be	sold or used	d by any perso	n for the pu	rpose o	f solicitin	a contrib	utions
	for commercial purposes, other than using the name								
abla	NAME OF COMMITTEE (In Full)								
$ \; angle$	CAMPAIGN FOR PRIMARY ACCO	OUNTABILIT	TY INC						
$\angle$									
	Full Name (Last, First, Middle Initial)								
Α.	Bank of America				Date of D	isburse	ment		
	Mailing Address DOD 05440				M M	/ D		2010	Y
	Mailing Address PO Box 25118				10	25		2012	-
	City	State Zip	Code						
	Tampa		22-5118		Transac	tion ID	: SB21B.	.5554	
	Purpose of Disbursement								
	Bank fees			001	Amount o	f Each	Disburse	ment this	Period
	Candidate Name			Category/					10.00
				Туре		7	7		10.00
		nent For: 2012	0 1						
	Senate Y	Primary	General						
	State: District:	Other (specify)	▼						
_	Full Name (Last, First, Middle Initial)								
В.	,				Date of D	)isburse	ment		
٠.	Dank of America				M M	/ D		/	V
	Mailing Address PO Box 25118				11	0		2012	- '
	City		Code		Transac	tion ID	: SB21B	.5569	
	Tampa	FL 336	522-5118		Transa		. 052.5	.0000	
	Purpose of Disbursement Banking fees			001	Amount o	f Eoob	Dioburoo	mont this	Pariod
	Candidate Name				Amount	I Eacii	Disbuise	ment this	renou
	Canadato Hamo			Category/ Type	1				50.00
	Office Sought: House Disbursen	nent For: 2012		Турс		7	,		
		Primary	General						
	President	Other (specify)	▼						
	State: District:								
	Full Name (Last, First, Middle Initial)								
C.	Ceterus, Inc.				Date of D	isburse	ment		
					M M	/ D		Y Y	Y
	Mailing Address PO Box 19366				10	25		2012	
	City	State Zip	Code						
	Kalamazoo	MI 490			Transac	tion ID	: SB21B	.5559	
	Purpose of Disbursement								
	Office expenses			001	Amount o	f Each	Disburse	ment this	Period
	Candidate Name			Category/	1	-			20.40
				Туре		1	-		59.40
		nent For: 2012							
	Senate	Primary	General						
	President State: District:	Other (specify)	▼						
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S	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 9 OF							OF	14			
	EMIZED DISBURSEMENTS		arate schedule(s)		_	LIIN⊏ I' Conly	_	11.							
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	for commercial purposes, other than using the name														
	NAME OF COMMITTEE (In Full)														
$  \rangle$	CAMPAIGN FOR PRIMARY ACCO	DUNTA	BILITY INC												
$\angle$															
_	Full Name (Last, First, Middle Initial)														
A.	Ceterus, Inc.						Date	of D	isburs	eme	nt				
	Mallian Address BO D. 1999						M			D	/ Y		1 Y	Υ	
	Mailing Address PO Box 19366						10	)	2	25		_ 20	12	-	
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	Kalamazoo	MI	49019				Tra	nsac	tion ID	) : S	B21B.	5560			
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		Primary	General												
	President	Other (spe	ecify) 🔻												
_	State: District:					_									
P	Full Name (Last, First, Middle Initial)						Doto	of D	ichurc	om a	nt				
В.	Ceterus, Inc.								isburs		iii.				
	Mailing Address PO Box 19366					-	M -	M /		05	/ Y		12	Y	
	Maning Addiese FO Dox 18300											20	, 14	-	
	City	State	Zip Code				<b>T</b> -	<b>no-</b>	tion I		DO4D	EECC	,		
	Kalamazoo	MI	49019				ıra	nsac	uon IL	) : S	B21B.	აახგ	•		
	Purpose of Disbursement Accounting fees					$\neg \Box$	]								
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	Candidate Name				egory	y/							150	0.00	
	Office Sought: House Disbursen	nent For:	2012	I,	ype				7		,				
		Primary	2012 General												
	President	Other (spe													
	State: District:	2 (OPO	- · <b>J</b> / . ▼												
_	Full Name (Last, First, Middle Initial)					$\overline{}$									
C.	CMF Communications						Date	of D	isburse	eme	nt				
							M	M	/ D	D	/ Y	Y	Y	Υ	
	Mailing Address 25000 Portofino Cir.						10	)	2	24		_20	12	ال	
	#129	<u> </u>													
	,	State FL	Zip Code				Tra	nsac	tion IE	) : S	B21B.	5562	!		
	Palm Beach Gardens Purpose of Disbursement	I'L	33148-1293												
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	Candidate Name				egory	v/	AIIIO	arit O	Lacii	פוט	Dui SEI	HEIIL	11115	1 6110	Ju
					ype	y'		-			400		41	2.82	
	Office Sought: House Disburser	nent For:	2012		-	$\overline{}$			7		7				
	Senate	Primary	General												
	President	Other (spe	ecify) 🔻												
_	State: District:														
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S	CHEDULE B (FEC Form 3X)			T FOD ! !!!			Р	AGE 10	OF 14	<u></u>
	EMIZED DISBURSEMENTS	Use separate so		FOR LINE I	-		[ [	, .GL 10	01 14	_
11	LIVIIZED DISBURSEIVIEN IS	for each categor		X 21b	22	23	24	25	5	26
		Detailed Summa	ry Page	27	28a	28b	280	29	)   3	30b
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	for commercial purposes, other than using the nam									
$\setminus$	NAME OF COMMITTEE (In Full)									
$  \rangle$	CAMPAIGN FOR PRIMARY ACCO	OUNTABILIT'	Y INC							
$\angle$										
	Full Name (Last, First, Middle Initial)									
A.	Jonathan Martin				Date of I	Disburse	ment			
	Mailing Address 4700 M. L. LUI				M = M	/ D		Y   Y   Y		
	Mailing Address 1739 Maybank Highway Suite T-346				11	0:		2012		
		State Zip C	ode							_
	Charleston	SC 2941			Transa	tion ID	: SB21I	3.5570		
	Purpose of Disbursement									
	Treasury fees			001	Amount of	of Each	Disburs	ement th	s Period	
	Candidate Name			Category/					500.00	1
				Туре		7	7	<u> </u>	00.00	J.
		nent For: 2012								
	Senate Y	,	General							
	State: District:	Other (specify)								
_	Full Name (Last, First, Middle Initial)									
R					Date of I	)ishurse	ment			
٥.	Piryx, Inc.				M M		_	Y . Y . '		
	Mailing Address 144 2nd St.				10	2		2012		
	1st Floor									
	City	State Zip C	ode		Transa	ction ID	· SR21I	B 5552		
	San Francisco	CA 9410	5		Transa	J. 1011 1D	. 002	5.0002		
	Purpose of Disbursement Credit card processing fees			000	A		Dialaa		- Daviad	
	Candidate Name			003	Amount o	or Each	DISDUIS	ement th	s Period	
	Candidate Name			Category/ Type					9.00	ı
	Office Sought: House Disbursen	nent For:		Туре		,	,			
			General							
	President	Other (specify)								
	State: District:									
	Full Name (Last, First, Middle Initial)									
C.	Piryx, Inc.				Date of [	Disburse	ment			
					M M	/ D	D /	Y   Y   Y		
	Mailing Address 144 2nd St.				11	20	)	2012		
	1st Floor City S	State Zip C	'odo							
	•	CA 9410			Transa	ction ID	: SB21I	B.5567		
	Purpose of Disbursement	0.10								
	Credit card processing fees			001	Amount of	of Each	Disburs	ement th	s Period	
	Candidate Name			Category/					1	1
				Type		7			9.00	
		nent For: 2012								
	Senate	,	General							
		Other (specify)								
	State: District:									
_ ا								F	18.00	1
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۱,	OTAL This Period (last nage this line number only)									

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SC	CHEDULE B (FEC Form 3X)		F05 : 11:-	NUMBER: PAGE 11 OF 14				
ITEMIZED DISBURSEMENTS  Use separate schedule(start and the se		FOR LINE (check only	THOMBELL.					
	EIVIIZED DIODUKOEWENIO	for each category of the	(cricck only	22 23 24 25 26				
		Detailed Summary Page	27	28a 28b 28c 29 30				
Λ.	by information copied from such Reports and Staten	ante may not be sold as:						
	for commercial purposes, other than using the nam							
	NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , ,						
$  \rangle$	CAMPAIGN FOR PRIMARY ACCO	NI INITA DII ITV INIC						
/	CAMPAIGN FOR PRIMART ACCC	DONTABILITING						
	Full Name (Last, First, Middle Initial)							
A.	Webster, Chamberlain & Bean, LLF	<b>o</b>		Date of Disbursement				
				M M / D D / Y Y Y Y				
	Mailing Address 1747 Pennsylvania Ave., NW			10 25 2012				
	-							
	,	State Zip Code		Transaction ID: SB21B.5557				
	Washington Purpose of Disbursement	DC 20006						
	Legal fees		001	Amount of Each Disbursement this Period				
	Candidate Name			Amount of Each Disbursement this Feriod				
	Canadate Name		Category/ Type	401.50				
	Office Sought: House Disbursen	nent For: 2012	Турс					
	Senate	Primary General						
	President	Other (specify) ▼						
	State: District:	•						
	Full Name (Last, First, Middle Initial)							
В.				Date of Disbursement				
				M M / D D / Y Y Y Y				
	Mailing Address							
	City	State Zip Code						
	Purpose of Disbursement							
				Amount of Each Disbursement this Period				
	Candidate Name		Category/					
			Type					
	Office Sought: House Disbursen	nent For:	7.					
	Senate	Primary General						
	President	Other (specify) ▼						
	State: District:							
	Full Name (Last, First, Middle Initial)							
C.				Date of Disbursement				
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	City	State Zip Code						
	,	<u> </u>						
	Purpose of Disbursement							
			11 11	Amount of Each Disbursement this Period				
	Candidate Name		Category/					
			Type					
	Office Sought: House Disbursen							
		Primary General						
	State: District:	Other (specify) ▼						
	District.							
,	IIDTOTAL of Dishurasments This Dage (artists)			401.50				
Ľ	UBTOTAL of Disbursements This Page (optional)		······					
۱.	OTAL This Period (last nage this line number only)			3576.09				

### SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 12 OF 14

FOR LINE 13 OF FORM 3X

Leo Linbeck III  Mailing Address PO Box 22500  City Houston State TX ZIP Code 77227  Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Per 130000.00  TERMS  Date Incurred Date Due Interest Rate Secured:  Mo4 / 30 / 2012 M M M / D D / 12/31/12 6.00 % (apr) Yes   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 Outstanding:  City State ZIP Code Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:	LOAN SOURCE Full Name (Last, First, Middle Initial)	
Leo Linbeck III		
Mailing Address Po Box 22500  City Houston State TX ZIP Code 77227  Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Per 130000,00  TERMS Date Incurred Date Due Interest Rate Secured:  "4"   "30"   "2012"   """   """   "12/31/12"   6.00	Leo Linneck III	Timary
City State ZIP Code Outstanding:  City State ZIP Code Outstanding at Close of This Period This Page (optional)	255 Embook iii	General
City State ZIP Code Outstanding:  City State ZIP Code Outstanding at Close of This Period This Page (optional)	Mailing Address PO Box 22500	Other (specify)
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## SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 13 OF 14

FOR LINE 13 OF FORM 3X

		Detailed Sulfilliary	rage
AME OF COMMITTEE (In Full) CAMPAIGN FOR PRIMARY A		' INC	Transaction ID : SC/10.5264
		IINC	
LOAN SOURCE Full Name (Last, Fire	st, Middle Initial)		Election:
Leo Linbeck III			Primary
Mailing Addraga			General Other (specify) ▼
Mailing Address PO Box 22500			Other (specify)
City Houston		IP Code 77227	
Original Amount of Loan	Cumulative Paym	ent To Date	Balance Outstanding at Close of This Period
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TERMS	D-1	- Donald Internal	1 Poly
Date Incurred	Date	e Due Interes	
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Mailing Address		Occupation	
City	ate ZIP Code	Amount Guaranteed	
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2. Full Name (Last, First, Middle Initial	)	Name of Employer	
Mailing Address		Occupation	
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City Sta	ate ZIP Code	Guaranteed Outstanding:	7 7 7
3. Full Name (Last, First, Middle Initial	)	Name of Employer	
Mailing Address		Occupation	
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carry outstanding balance only to LINE	3. Schedule D. for this li	ine. If no Schedule D. carr	y forward to appropriate line of Summary.
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## SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 14 OF 14

FOR LINE 13 OF FORM 3X

OAN SOURCE Full Name (Last, First, Middle Initial)	Election:
eo Linbeck III	Primary General
lailing Address PO Box 22500	Other (specify) ▼
ity Houston State TX	ZIP Code 77227
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. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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