



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**KLAUDER4CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	6705.00	38284.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	6705.00	38284.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	6516.14	49598.44
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	6516.14	49598.44
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	3619.45	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	11683.89	

**For further information contact:**

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

KLAUDER4CONGRESS

Report Covering the Period: From: 10 / 18 / 2012 To: 11 / 26 / 2012

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 06 / 2012 (date of general election)	COLUMN C Total for 11 / 07 / 2012 (date after general election)
<b>11. CONTRIBUTIONS</b> (other than loans) FROM:		
<b>(a) Individuals/Persons Other than Political Committees</b>		
<b>(i) Itemized (use Schedule A)</b>		
6450.00	36011.00	0.00
<b>(ii) Unitemized</b>		
255.00	2255.00	0.00
<b>(iii) Total of contributions from individuals</b>		
6705.00	38266.00	0.00
<b>(b) Political Party Committees</b>		
0.00	0.00	0.00
<b>(c) Other Political Committees</b>		
0.00	0.00	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 26

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	18.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
6705.00	38284.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
6470.03	18714.19	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
6470.03	18714.19	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
13175.03	56998.19	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 26

Write or Type Committee Name

KLAUDER4CONGRESS

 Report Covering the Period: From:  /  /  To:  /  / 
**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
<input type="text" value="6516.14"/>	<input type="text" value="49598.44"/>	<input type="text" value="0.00"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="7030.30"/>	<input type="text" value="0.00"/>	<input type="text" value="7030.30"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="7030.30"/>	<input type="text" value="0.00"/>	<input type="text" value="7030.30"/>
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 26

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
-------------------------------	---	---

(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	0.00	0.00
------	------	------

**21. OTHER DISBURSEMENTS**

0.00	0.00	0.00
------	------	------

**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

13546.44	49598.44	7030.30
----------	----------	---------

**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

6705.00	38284.00	0.00
---------	----------	------

**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

6516.14	49598.44	0.00
---------	----------	------

**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3990.86
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	13175.03
25. SUBTOTAL (add Line 23 and Line 24).....	17165.89
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	13546.44
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	3619.45

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**KLAUDER4CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jack Anderson**

Mailing Address 600 Ocean Road

City State Zip Code  
Vero Beach FL 32963

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NA retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 04 / 2012**

**Transaction ID : SA11AI.4505**

Amount of Each Receipt this Period  
 contribution **1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Pam Jackson**

Mailing Address 384 Tidewater Circle, N.

City State Zip Code  
Jacksonville FL 32211

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NA NA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2012**

**Transaction ID : SA11AI.4491**

Amount of Each Receipt this Period  
 contribution **250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Richard Lunquist**

Mailing Address 1596 Bel Air Ave

City State Zip Code  
Pompano Beach FL 33062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
self retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 27 / 2012**

**Transaction ID : SA11AI.4490**

Amount of Each Receipt this Period  
 contribution **250.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1500.00**





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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**KLAUDER4CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Kurt Wullenweber**

Mailing Address 97049 Pirates Point Rd.

City Yulee State FL Zip Code 32097

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation NA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**Transaction ID : SA11Al.4468**

Amount of Each Receipt this Period  
 450.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

450.00

6450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 26
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**KLAUDER4CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**James Klauder**

Mailing Address 811 Parkview Pl. W.

City Fernandina Beach	State FL	Zip Code 32034
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H2FL04112**

Name of Employer Foundation for Teaching Econom	Occupation Vice President
--	------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**11015.71**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

**Transaction ID : SA13A.4476**

Amount of Each Receipt this Period  

1500.00
---------

 loan by candidate

**B.** Full Name (Last, First, Middle Initial)  
**James Klauder**

Mailing Address 811 Parkview Pl. W.

City Fernandina Beach	State FL	Zip Code 32034
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H2FL04112**

Name of Employer Foundation for Teaching Econom	Occupation Vice President
--	------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**15520.71**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2012

**Transaction ID : SA13A.4484**

Amount of Each Receipt this Period  

4505.00
---------

 loan by candidate

**C.** Full Name (Last, First, Middle Initial)  
**James Klauder**

Mailing Address 811 Parkview Pl. W.

City Fernandina Beach	State FL	Zip Code 32034
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H2FL04112**

Name of Employer Foundation for Teaching Econom	Occupation Vice President
--	------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**15985.74**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2012

**Transaction ID : SA13A.4523**

Amount of Each Receipt this Period  

465.03
--------

 JK loan

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6470.03
6470.03

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 26			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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 Full)  
**KLAUDER4CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. Flash Foods</b>		M M / D D / Y Y Y Y 10 / 18 / 2012	
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period	
City State Zip Code Fernandina Beach FL 32034		26.65	
Purpose of Disbursement gas to political event		Transaction ID : SB17.4458	
Candidate Name <b>KLAUDER4CONGRESS</b>		Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 04			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. Flash Foods</b>		M M / D D / Y Y Y Y 10 / 19 / 2012	
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period	
City State Zip Code Fernandina Beach FL 32034		35.32	
Purpose of Disbursement gas to political event		Transaction ID : SB17.4459	
Candidate Name <b>KLAUDER4CONGRESS</b>		Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 04			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>c. Flash Foods</b>		M M / D D / Y Y Y Y 10 / 26 / 2012	
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period	
City State Zip Code Fernandina Beach FL 32034		39.57	
Purpose of Disbursement gas to political event		Transaction ID : SB17.4473	
Candidate Name <b>KLAUDER4CONGRESS</b>		Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 04			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	101.54
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 26			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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 Full)  
**KLAUDER4CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Flash Foods</b>		M M / D D / Y Y Y Y 10 / 28 / 2012
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period
City State Zip Code Fernandina Beach FL 32034		16.82
Purpose of Disbursement gas to political event		Transaction ID : SB17.4487
Candidate Name <b>KLAUDER4CONGRESS</b>		Category/ Type 002
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 04		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Flash Foods</b>		M M / D D / Y Y Y Y 10 / 28 / 2012
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period
City State Zip Code Fernandina Beach FL 32034		31.48
Purpose of Disbursement gas to political event		Transaction ID : SB17.4488
Candidate Name <b>KLAUDER4CONGRESS</b>		Category/ Type 002
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 04		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>c. Flash Foods</b>		M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period
City State Zip Code Fernandina Beach FL 32034		21.23
Purpose of Disbursement gas to political event		Transaction ID : SB17.4503
Candidate Name <b>KLAUDER4CONGRESS</b>		Category/ Type 002
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 04		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	69.53
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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 Full)  
**KLAUDER4CONGRESS**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. Flash Foods</b>		M M / D D / Y Y Y Y 11 / 02 / 2012	
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period	
City: Fernandina Beach State: FL Zip Code: 32034		10.00	
Purpose of Disbursement: gas to political event		Transaction ID : SB17.4509	
Candidate Name: <b>KLAUDER4CONGRESS</b>		Category/Type: 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012	
State: FL District: 04		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. Flash Foods</b>		M M / D D / Y Y Y Y 11 / 04 / 2012	
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period	
City: Fernandina Beach State: FL Zip Code: 32034		36.64	
Purpose of Disbursement: gas to political event		Transaction ID : SB17.4510	
Candidate Name: <b>KLAUDER4CONGRESS</b>		Category/Type: 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012	
State: FL District: 04		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. Flash Foods</b>		M M / D D / Y Y Y Y 11 / 04 / 2012	
Mailing Address 925 A South 14th Street		Amount of Each Disbursement this Period	
City: Fernandina Beach State: FL Zip Code: 32034		21.10	
Purpose of Disbursement: gas to political event		Transaction ID : SB17.4511	
Candidate Name: <b>KLAUDER4CONGRESS</b>		Category/Type: 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012	
State: FL District: 04		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	67.74
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 26			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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 Full)  
**KLAUDER4CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Flash Foods**

Mailing Address 925 A South 14th Street

City Fernandina Beach State FL Zip Code 32034

Purpose of Disbursement gas to political event

Candidate Name **KLAUDER4CONGRESS**

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: FL District: 04

Date of Disbursement: 11 / 05 / 2012

Amount of Each Disbursement this Period: 17.97

Transaction ID : SB17.4512

Category/Type: 002

Full Name (Last, First, Middle Initial)

**B. Flash Foods**

Mailing Address 925 A South 14th Street

City Fernandina Beach State FL Zip Code 32034

Purpose of Disbursement gas to political event

Candidate Name **KLAUDER4CONGRESS**

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: FL District: 04

Date of Disbursement: 11 / 06 / 2012

Amount of Each Disbursement this Period: 13.31

Transaction ID : SB17.4522

Category/Type: 002

Full Name (Last, First, Middle Initial)

**C. WBOB**

Mailing Address 4190 Belfort Rd.  
Ste. 450

City Jacksonville State FL Zip Code 32216

Purpose of Disbursement radio ads

Candidate Name **KLAUDER4CONGRESS**

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: FL District: 04

Date of Disbursement: 10 / 25 / 2012

Amount of Each Disbursement this Period: 1500.00

Transaction ID : SB17.4474

Category/Type: 004

**SUBTOTAL** of Disbursements This Page (optional) ..... 1531.28

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 26		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 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 Full)  
**KLAUDER4CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WOKV</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 8000 Belfort Parkway Suite 100		Amount of Each Disbursement this Period 4505.00 <b>Transaction ID : SB17.4485</b>
City Jacksonville State FL Zip Code 32256	Purpose of Disbursement radio ads 004 Category/Type	
Candidate Name <b>KLAUDER4CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 04		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4505.00
<b>TOTAL</b> This Period (last page this line number only).....	6275.09

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 26	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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 Full)  
**KLAUDER4CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. James Klauder</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012
Mailing Address 811 Parkview Pl. W.		Amount of Each Disbursement this Period 4505.00 <b>Transaction ID : SB19A.4527</b>
City Fernandina Beach	State FL	
Zip Code 32034	Purpose of Disbursement loan repayment	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 04	

Full Name (Last, First, Middle Initial) <b>B. James Klauder</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012
Mailing Address 811 Parkview Pl. W.		Amount of Each Disbursement this Period 2525.30 <b>Transaction ID : SB19A.4528</b>
City Fernandina Beach	State FL	
Zip Code 32034	Purpose of Disbursement loan repayment	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 04	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7030.30
<b>TOTAL</b> This Period (last page this line number only).....	7030.30



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **KLAUDER4CONGRESS** Transaction ID : **SC/10.4218**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>James Klauer</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 811 Parkview Pl. W.	

City	State	ZIP Code
Fernandina Beach	FL	32034

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1174.78	0.00	1174.78

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
03 / 31 / 2012	08/2012	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	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	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	1174.78
<b>TOTALS</b> 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.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**KLAUDER4CONGRESS**

Transaction ID : **SC/10.4339**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

**James Klauer**

Primary

General

Other (specify) ▼

Mailing Address

811 Parkview Pl. W.

City

State

ZIP Code

Fernandina Beach

FL

32034

Original Amount of Loan

2952.53

Cumulative Payment To Date

2525.30

Balance Outstanding at Close of This Period

427.23

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 29 / 2012

Date Due

M M / D D / Y Y Y Y  
/ / 11.07.2012

Interest Rate

0.00 % (apr)

Secured:

Yes  No

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

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

427.23

**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.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **KLAUDER4CONGRESS** Transaction ID : **SC/10.4403**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>James Klauer</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 811 Parkview Pl. W.	

City	State	ZIP Code
Fernandina Beach	FL	32034

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2900.00	0.00	2900.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
09 / 18 / 2012	11/6/2012	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	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	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	2900.00
<b>TOTALS</b> 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.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**KLAUDER4CONGRESS**

Transaction ID : **SC/10.4412**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**James Klauer**

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
811 Parkview Pl. W.

City State ZIP Code  
Fernandina Beach FL 32034

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
2251.06 0.00 2251.06

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
09 / 28 / 2012 M M / D D / 11/06/2012 0.00 % (apr)  Yes  No

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	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	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	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 2251.06

**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.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**KLAUDER4CONGRESS**

Transaction ID : **SC/10.4452**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

**James Klauer**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
811 Parkview Pl. W.

City State ZIP Code  
Fernandina Beach FL 32034

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
208.34 0.00 208.34

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No

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	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	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	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 208.34

**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.

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**KLAUDER4CONGRESS**

Transaction ID : **SC/10.4476**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**James Klauer**

Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
811 Parkview Pl. W.

City State ZIP Code  
Fernandina Beach FL 32034

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
1500.00 0.00 1500.00

**TERMS** Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr)  Yes  No  
10 / 25 / 2012 / 11.07.2012

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	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	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	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 1500.00

**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.

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**KLAUDER4CONGRESS**

Transaction ID : **SC/10.4484**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**James Klauer**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
811 Parkview Pl. W.

City State ZIP Code  
Fernandina Beach FL 32034

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
4505.00 4505.00 0.00

### TERMS

Date Incurred Date Due Interest Rate Secured:  
10 / 29 / 2012 M M / D D / 11.07.2012 0.00 % (apr)  Yes  No

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	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	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	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 0.00

**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.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**KLAUDER4CONGRESS**

Transaction ID : **SC/10.4523**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

**James Klauer**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
811 Parkview Pl. W.

City State ZIP Code  
Fernandina Beach FL 32034

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
465.03 0.00 465.03

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
11 / 06 / 2012 M M / D D / 11/07/2012 0.00 % (apr)  Yes  No

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	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	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	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 465.03

**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.



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**KLAUDER4CONGRESS**

Transaction ID : **SC/10.4136**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

**Klauder R. Klauder**

Primary

General

Other (specify) ▼

Mailing Address

811 Parkview Pl. W.

City

State

ZIP Code

Fernandina Beach

FL

32034

Original Amount of Loan

2089.19

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2089.19

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M /

D 31 D /

Y 2011 Y

M M /

D D /

Y 11/10/2012 Y

0.00 % (apr)

Yes  No

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

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

2089.19

**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.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **KLAUDER4CONGRESS** Transaction ID : **SC/10.4226**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Klauder R. Klauder</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 811 Parkview Pl. W.	

City	State	ZIP Code
Fernandina Beach	FL	32034

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
668.26	0.00	668.26

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
03 / 30 / 2012	08/07/2012	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	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	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	668.26
<b>TOTALS</b> This Period (last page in this line only).....	11683.89

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