PAGE 1 / 27

#### FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		For An A	uthorized Com	mittee			Office Use Only
NAME OF COMMITTEE (in		YPE OR PRINT		cample: If typinger the lines.	g, type	12FE4M5	
JOE KAUFMA	N FOR C	ONGRESS					I
ADDRESS (number ar	nd street)	2645 EXECUTI	VE PARK DRIVE S	ΓΕ 512 			
▼ Check if dit							
than previo reported. (A		WESTON				FL L	33331
2. FEC IDENTIFIC	CATION NUI	MBER ▼	CITY ▲			STATE A	ZIP CODE ▲
C C0050120			3. IS THIS REPORT	x NEW	OR	AMEND (A)	STATE ▼ DISTRICT    FL   20
4. TYPE OF RE  (a) Quarterly R  April 15	·	ŕ	(b) 12-Day <b>PRE</b>	E-Election Reported Primary (12P)	. [	General (1	
July 15	Quarterly Re	port (Q2)		Convention	120)	Opeciai (12	
<b>x</b> Octobe	er 15 Quarterly	Report (Q3)	Election on	M M /	D D /	YYYY	in the State of
January	y 31 Year-End	Report (YE)	(c) 30-Day <b>POS</b>	<b>ST</b> -Election Rep	ort for the		
				General (30G	)	Runoff (30	R) Special (30S)
Termina	ation Report (1	ΓER)	Election on	M M /	D D /	Y Y Y Y	in the State of
5. Covering Period	M M M	/ 01 /	Y Y Y Y 2022	through	M M M	/ 30 /	Y Y Y Y Y 2022
I certify that I have of		Report and to KAUFMAN, JO		nowledge and l	belief it is t	rue, correct and	complete.
Signature of Treasure		TMAN, JOE, , ,		[Electronically I	Filed]	Date 10	/ D
NOTE: Submission of	false, erroneo	us, or incomplet	e information may	subject the pers	son signing	this Report to th	e penalties of 52 U.S.C. §30109
Office Use Only							FEC FORM 3 (Revised 05/2016)

#### **SUMMARY PAGE**

of Receipts and Disbursements

PAGE 2 / 27

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
JOE KAUFMAN FOR CONGRESS

2022 07 2022 09 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 0.00 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 0.00 0.00 (subtract Line 6(b) from Line 6(a)) ...... 7. Net Operating Expenditures (a) Total Operating Expenditures 222.85 1328.85 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 222.85 1328.85 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of -25830.78Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 50291.89 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 89862.53 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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 05/2016)

PAGE 3 / 27

Write or Type Committee Name

#### JOE KAUFMAN FOR CONGRESS

07 09 01 2022 30 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 0.00 (i) Itemized (use Schedule A)..... 0.00 0.00 (ii) Unitemized ..... (iii) TOTAL of contributions 0.00 0.00 from individuals ..... 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 0.00 0.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 13. LOANS: (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) ..... 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 0.00 0.00 (Carry Total to Line 24, page 4).....

**DETAILED SUMMARY PAGE** 

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 27

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	222.85	1328.85
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other 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 (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	222.85	1328.85
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	rting period	- 25607.93
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		- 25607.93
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	222.85
27.	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	- 25830.78

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

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

FOR LINE NUMBER:					PAGE	5	O	F	27
(check only one)									
	X	17		18		19a			19b
		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 Full) JOE KAUFMAN FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. Whispering Woods 2022 Mailing Address 7401 Wiles Rd State Zip Code City **FEC Identification Number** FΙ **Coral Springs** 33067 Purpose of Disbursement C00501205 Candidate Name Amount of Each Disbursement this Period Category/ JOE KAUFMAN FOR CONGRESS Type Disbursement For: 2022 Office Sought: 104.92 House Senate Primary General Transaction ID: SB17.63418 Other (specify) President Memo Item FL State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 104.92 TOTAL This Period (last page this line number only)..... 104.92

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

FOR LINE NUMBER: (check only one)

**PAGE** 

6 OF 27

13a 13b Transaction ID: SC/9.63372 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary BASE CONNECT, INC. General X Mailing Address 1155 - 15TH ST, NW Other (specify) SUITE 410 State ZIP Code City Personal Funds of the Candidate DC 20005 WASHINGTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 20235.44 0.00 20235.44 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) <sup>D</sup>29<sup>D</sup> M09M ž014 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 20235.44 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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

OF

27

13b Transaction ID: SC/9.63375 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary CENTURY DATA SYSTEMS CORP General X Mailing Address 1155 - 15TH STREET, NW Other (specify) City State ZIP Code Personal Funds of the Candidate DC 20005 WASHINGTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 6552.89 0.00 6552.89 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) <sup>D</sup>29<sup>D</sup> M09M ž014 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 6552.89 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

8 OF

27

**PAGE** 

13b Transaction ID: SC/9.63377 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary DIRECT MAIL PROCESSORS, INC. General X Mailing Address 1150 CONRAD COURT Other (specify) City State ZIP Code Personal Funds of the Candidate MD 21740 **HAGERSTOWN** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 102.55 0.00 102.55 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) <sup>D</sup>29<sup>D</sup> M09M ž014 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 102.55 TOTALS This Period (last page in this line only) ..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

**PAGE** 9 OF FOR LINE NUMBER: (check only one) 13a

27

13b Transaction ID: SC/9.63373 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary INTEGRAM General X Mailing Address Other (specify) 22695 Commerce Center Court City State ZIP Code Personal Funds of the Candidate VA 20166 **Dulles** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 10210.45 0.00 10210.45 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) <sup>D</sup>29<sup>D</sup> M09M ž014 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 10210.45 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

PAGE FOR LINE NUMBER:

10 OF 27

for each category of the (check only one) 13a Detailed Summary Page 13b Transaction ID: SC/9.63376 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary LEGACY LISTS, INC. - BROKERAGE General X Mailing Address 1155 - 15TH STREET, NW Other (specify) SUITE 410 State ZIP Code City Personal Funds of the Candidate DC 20005 WASHINGTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 6327.81 0.00 6327.81 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) <sup>D</sup>29<sup>D</sup> M09M ž014 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 6327.81 TOTALS This Period (last page in this line only) ..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

**PAGE** 

11 OF 27

13a Detailed Summary Page 13b Transaction ID: SC/9.63374 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary LEGACY LISTS, INC. - MANAGEMENT General X Mailing Address 1155 15th St NW Other (specify) City State ZIP Code Personal Funds of the Candidate FL 20005 Washington Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 6769.75 0.00 6769.75 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) <sup>D</sup>29<sup>D</sup> M09M ž014 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 6769.75 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 12 C
FOR LINE NUMBER: (check only one)

13a

27

		Detailed Guillinary	13b			
NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRES	9	Tran	saction ID : SC/9.63378			
JOE RAUFWAN FOR CONGRES	3					
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	☐ Memo It	em Election: 2014			
SIMPKINS ESCROW LLC			Primary			
			<b>x</b> General			
Mailing Address 29243 St Just Dr			Other (specify) ▼			
City	State	ZIP Code				
UNIONVILLE	VA	22567	Personal Funds of the Candidate			
O initial Association ( )	O a sa latina Da	To Date	Polonia O Interestina et Olonia (This Police			
Original Amount of Loan	Cumulative Pa	yment To Date	Balance Outstanding at Close of This Period			
93.00		0.00	93.00			
	,	,	, , , , , , , , , , , , , , , , , , , ,			
TERMS Date Incurred		Date Due Interest (If none, e				
M09 <sup>M</sup> / D29 <sup>D</sup> / Y Z014 Y	M M / D D	/ Y Y Y Y	0/ <sub>2</sub> (apr) Ves X No			
			% (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				
		Amount				
City State	ZIP Code	Guaranteed				
Gity	Zir Code	Outstanding:	7			
2. Full Name (Last, First, Middle Initial)		Name of Employer				
NA ::: A 1.1		Occupation				
Mailing Address		Occupation	Occupation			
		Amount				
City State	ZIP Code	Guaranteed				
		Outstanding:	7			
3. Full Name (Last, First, Middle Initial)		Name of Employer				
NA 25 A 1 1		Occupation				
Mailing Address		Occupation				
		Amount				
City	ZIP Code	Guaranteed				
		Outstanding:	, , , , , , , , , , , , , , , , , , , ,			
4. Full Name (Last, First, Middle Initial)		Name of Employer				
Maillion Andalon an		Occupation				
Mailing Address		Occupation				
		Amount				
City State	ZIP Code	Guaranteed				
		Outstanding:	7			
	ı	<u> </u>				
SUBTOTALS This Period This Page (optional	١					
This relied this rage (optional	,		93.00			
TOTALS This Period (last page in this line or	nly)		50291.89			
			7 7 7			
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry	forward to appropriate line of Summary.			

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

FOR LINE NUMBER: (check only one)

**PAGE** 

13 OF

X	13a
	13b

27

Transaction ID: SC/10.48978 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary JOE KAUFMAN FOR CONGRESS General Mailing Address 2645 EXECUTIVE PARK DRIVE STE 512 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33331 WESTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D24D M 04M ž014 Úpon demană x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE 14

13a 13b

OF

27

						135	
	ME OF COMMITTEE (In Full) OE KAUFMAN FOR CONC	SRESS			Transa	ction ID : SC/10.48979	
	LOAN SOURCE Full Name (Last, JOE KAUFMAN FOR COI Mailing Address 2645 EXECUTIVE PARK DRIVE STE	NGRES			☐ Memo Item	Election: 2014    X   Primary     General     Other (specify)	
	2645 EXECUTIVE PARK DRIVE STE	512					
	City		State	ZIP Co	de	Personal Funds of the Candidate	
	WESTON FL 3333						
	Original Amount of Loan		Cumulative Pay	yment To	Date Bal	ance Outstanding at Close of This Period	
	11000	0.00			9500.00	1500.00	
	TERMS Date Incurred		D	ate Due	Interest Rat (If none, ente		
	M04 <sup>M</sup> / D30 <sup>D</sup> / Y Z014	Y	M M / D D	/ Úpo	on demand C	% (apr) Yes X No	
	List All Endorsers or Guarantors	(if any) to	Loan Source				
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer		
	Mailing Address				Occupation		
	City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
	2. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation		
	City	State	ZIP Code		Amount Guaranteed		
	-		Zii Oode		Outotailailig.	7	
	3. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation		
	City	State	ZIP Code		Amount Guaranteed Outstanding:	7 7 7	
	4. Full Name (Last, First, Middle In	itial)	l		Name of Employer		
	Mailing Address				Occupation		
	O't.	01-1-	710.0-1-		Amount Guaranteed		
	City	State	ZIP Code		Outstanding:	9 9	
SI	<b>UBTOTALS</b> This Period This Page (	optional)				1500.00	
T	TOTALS This Period (last page in this line only)						
	carry outstanding balance only to I II	NE 3. Sch	edule D. for this	s line. If	no Schedule D. carry for	ward to appropriate line of Summary.	
	and a substantiant of the substantial control of the substantial s	,			Junio 2, Juni j 101		

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

FOR LINE NUMBER: (check only one)

**PAGE** 

15 OF

×	13a
	13b

27

Transaction ID: SC/10.5512 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE Other (specify) STE 512 State ZIP Code City X Personal Funds of the Candidate FL 33331 WESTON Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 3248.21 0.00 3248.21 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 07M Ž011 Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3248.21 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

**PAGE** 

16 OF

×	13a
	13b

27

Transaction ID: SC/10.9126 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE Other (specify) STE 512 State ZIP Code City X Personal Funds of the Candidate FL 33331 WESTON Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5000.00 3800.00 1200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D31 D M 12M Ž011 Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1200.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE

17 OF

13a 13b

27

Transaction ID: SC/10.20680 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE # 512 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33331 WESTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>20<sup>D</sup> M 06M Ž01Ž Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

**PAGE** 

18 OF

13a 13b

27

Transaction ID: SC/10.22542 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE # 512 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33331 WESTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 500.00 0.00 500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D05D M 07M Ž01Ž Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 500.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

**PAGE** 

19 OF

13a 13b

27

Transaction ID: SC/10.22543 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE # 512 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33331 WESTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>13<sup>D</sup> M 07M Ž01Ž Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE

20 OF

13a 13b

27

Transaction ID: SC/10.22544 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE # 512 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33331 WESTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>16<sup>D</sup> M 07M Ž01Ž Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE

21

13a 13b

27

OF

Transaction ID: SC/10.26611 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE # 512 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33331 WESTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 3200.00 823.50 2376.50 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D 15D <sup>M</sup>80<sup>M</sup> Ž01Ž Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 2376.50 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE

22 OF

×	13a
	13b

27

Transaction ID: SC/10.50920 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE # 512 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33331 WESTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 6000.00 0.00 6000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>20<sup>D</sup> <sup>M</sup>80<sup>M</sup> ž014 Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 6000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE

23 OF

×	13a
	13b

27

Transaction ID: SC/10.50921 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary KAUFMAN, JOE, , , General Mailing Address 2645 EXECUTIVE PARK DRIVE # 512 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33331 WESTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 6000.00 0.00 6000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>20<sup>D</sup> <sup>M</sup>80<sup>M</sup> ž014 Upon Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 6000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE

24 OF

ſ	X	13a
ſ		13b

27

Transaction ID: SC/10.58526 NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Kaufman, Joseph, , , General Mailing Address 8708 NW 82 ST. Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 33321 Tamarac Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5745.93 0.00 5745.93 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D05D M 03M Ž015 Yon demand Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5745.93 TOTALS This Period (last page in this line only)..... 39570.64 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

### SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 25 OF
FOR LINE NUMBER:
(check only one)

9 **x** 10

27

#### NAME OF COMMITTEE (In Full) JOE KAUFMAN FOR CONGRESS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Direct Mail Creative Fees** BASE CONNECT. INC. Mailing Address 1155 15th St NW STE 410 City State Zip Code DC Washington 20005 Transaction ID: SD10.33907 Outstanding Balance Beginning This Period 20235.44 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 20235.44 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CENTURY DATA SYSTEMS CORP Direct Mail Program Postage Mailing Address 1155 - 15TH STREET, NW State Zip Code WASHINGTON 20005 DC Outstanding Balance Beginning This Period Transaction ID: SD10.33908 6552.89 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 6552.89 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): DIRECT MAIL PROCESSORS, INC. Direct Mail Program Postage Mailing Address 2976 Penwick Lane City State Zip Code MD Dunkirk 20754 Outstanding Balance Beginning This Period Transaction ID: SD10.33909 102.55 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 102.55 0.00 1) SUBTOTALS This Period This Page (optional) ..... 26890.88 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

#### SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

N

(Use separate schedule(s) for each

PAGE 26 OF FOR LINE NUMBER: (check only one)

	9
.,	4.0

27

cluding Loans			numbered line)	<b>  X</b>   10	
AME OF COMMITTEE (In Full)					
JOE KAUFMAN FOR	CON	IGRESS			
			Not an at Dala	(D)	
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor INTEGRAM				Nature of Debt (Purpose): Direct Mail Program Printing & Mailshop	
IIVI E OTO (IVI					
Mailing Address 22695 Commerce Center Co	ourt				
011	01-1-	7'. 0. 1.			
City Dulles	State VA	Zip Code 20166			
		20100			
Outstanding Balance Beginning This Period			Transaction II	D : SD10.33910	
10210.45					
Amount Incurred This Period	Payment This Period		Outstanding B	Balance at Close of This Period	
0.00		0.		10210.45	
B. Full Name (Last, First, Middle Initial) of Del	otor or Cred	litor	Nations of Dalet	(D	
LEGACY LISTS, INC BROKERAGE			Nature of Debt Direct Mail List	,	
Mailing Address 1155 - 15TH STREET, NW					
SUITE 410 City	State	Zip Code			
WASHINGTON	DC	20005			
Outstanding Balance Beginning This Period			Transaction II	- CD40 22044	
			Transaction IL	D : SD10.33911	
6327.81					
Amount Incurred This Period		Payment This Period	Outstanding B	Balance at Close of This Period	
0.00		0.	00	6327.81	
7		7		7	
C. Full Name (Last, First, Middle Initial) of De			Nature of Debt	(Purpose):	
LEGACY LISTS, INC MANA	Direct Mail List				
Mailing Address 1155 15th St NW					
Mailing Address 1155 15th St NW					
City	State	Zip Code			
Washington	FL	20005			
Outstanding Balance Beginning This Period			Transaction I	ID : SD10.33912	
6769.75					
7					
Amount Incurred This Period		Payment This Period	Outstanding B	Balance at Close of This Period	
0.00	L	, , , ,	00	6769.75	
SUBTOTALS This Period This Page (optional	l) ·····			23308.01	
TOTALS This Period (last page this line num	ber only) ····				
TOTAL OUTSTANDING LOANS from Sched	ule C (last p	page only)		, , , , , ,	
ADD 2) and 3) and carry forward to appropr	iate line of s	Summary Page (last page o	nlv) ▶		
_,, aa,a. to appropr		ago (.aot pago o	,, .		

#### SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE 27 OF FOR LINE NUMBER: (check only one)

9 **X** 10

			, , , , , ,	
NAME OF COMMITTEE (In Full)		ICDECC		
JOE KAUFMAN FOR CONGRESS  A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SIMPKINS ESCROW LLC			Nature of Debt (Purpose): Indirect Prog Exp Caging & Escrow	
Mailing Address 29243 St Just Dr				
Cit.	Ctata	Zin Onda		
City UNIONVILLE	State VA	Zip Code 22567		
Outstanding Balance Beginning This		22301	Transaction ID : SD10.33913	
93.0	00			
7	30			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.0	00	0.00	93.00	
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):	
Mailing Address				
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This	Period	I		
Assert Leaves d'This Paris d		Decree of This Decided	O talending Balance of Olean of This Bailed	
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
		, ,	, , ,	
C. Full Name (Last, First, Middle Initia	Nature of Debt (Purpose):			
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This	Period			
	-			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
		7 7		
1) SUBTOTALS This Period This Page (	optional) ······		93.00	
2) TOTALS This Period (last page this li	<b>▶</b> 50291.89			
3) TOTAL OUTSTANDING LOANS from	→ 39570.64			
4) ADD 2) and 3) and carry forward to a	89862.53			