PAGE 1 / 8

FEC FORM 3		EPORT (ND DISE For An Auth	BURSE	MENTS			Office Use Only			
1. NAME OF COMMITTEE (in		YPE OR PRINT 🔻		xample: If typing	g, type	12FE4M5				
					1 1 1 1					
ADDRESS (number an	d street)	6213 CHARLOTTE	AVE SUITE 11	2						
▼ Check if dif										
than previou reported. (A	isly CC)	NASHVILLE				TN 37209				
2. FEC IDENTIFIC	ATION NU	/BER ▼	CITY 🔺			STATE A	ZIP CODE			
C C0051954	6		3. IS THIS REPORT	× NEW (N)	OR	AMENDE (A)	ED STATE ▼ DISTRICT			
July 15 October	Quarterly Re Quarterly Re Quarterly Rep 15 Quarterly	port (Q1) port (Q2) Report (Q3)) 12-Day PRI	E-Election Repo Primary (12P) Convention (1		General (12 Special (12				
-	31 Year-End) 30-Day PO	ST-Election Rep General (30G)		Runoff (30F	R) Special (30S) in the State of			
5. Covering Period	M M 01	/ D D / Y	Y Y Y 2022	through	M 03	M / D D / 31	Y Y Y Y 2022			
I certify that I have e. Type or Print Name of		Report and to the Arnold Jr., Thoma		nowledge and k	oelief it is i	true, correct and	complete.			
Signature of Treasure	Arnola	Jr., Thomas, C, ,		[Electronically F	Filed]	Date	/ D D / Y Y Y Y 15 / 2022			
NOTE: Submission of	false, erroneo	us, or incomplete in	nformation may	subject the pers	son signing	this Report to the	e penalties of 52 U.S.C. §30109.			
Office Use Only							FEC FORM 3 (Revised 05/2016)			

SUMMARY PAGE

of Receipts and Disbursements PAGE 2/8 FEC Form 3 (Revised 05/2016) Write or Type Committee Name LOU ANN FOR CONGRESS Μ D D D D ž022 01 2022 03 31 01 Report Covering the Period: From: To: COLUMN A COLUMN B This Period **Election Cycle-to-Date** 6. Net Contributions (other than loans) **Total Contributions** (a) 0.00 117791.03 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 2500.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 115291.03 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 344850.36 (from Line 17) (b) Total Offsets to Operating 1687.65 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 343162.71 (subtract Line 7(b) from Line 7(a)) 8. Cash on Hand at Close of 128.32 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 228000.00 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

Γ	DE FEC Form 3 (Revised 05/2016)	TAILED SUMMARY PAGE of Receipts	PAGE 3 / 8
W	ite or Type Committee Name		
	OU ANN FOR CONGRESS		
_			
Re	eport Covering the Period: From:	/ D D / Y Y Y Y 01 2022 To:	M M / D D / Y
	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than		
	Political Committees	0.00	
	(i) Itemized (use Schedule A)	0.00	90869.30
	(ii) Unitemized	0.00	26921.73
	(iii) TOTAL of contributions	, , ,	117701.02
	from individuals	0.00	117791.03
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)	, , , ,	, , , , , , , , , , , , , , , , , , , ,
	(d) The Candidate	0.00	0.00
	(e) TOTAL CONTRIBUTIONS		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	117791.03
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13.	LOANS:		
	(a) Made or Guaranteed by the Candidate	0.00	228000.00
	(b) All Other Loans (c) TOTAL LOANS	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	228000.00
14.	OFFSETS TO OPERATING EXPENDITURES		
	(Refunds, Rebates, etc.)	0.00	1687.65
15.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16	TOTAL RECEIPTS (add Lines		
10.	11(e), 12, 13(c), 14, and 15)	0.00	347478.68
	(Carry Total to Line 24, page 4)		

Image# 202204169500004149

FEC Form 3 (Revised 05/2016) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 0.00 344850.36 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 1000.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 1500.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 2500.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 0.00 347350.36 (add Lines 17, 18, 19(c), 20(d), and 21)

III. CASH SUMMARY

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		7		9	128.32
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		7		9	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		7		,	128.32
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	[.	7		7	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		7		7	128.32

DETAILED SUMMARY PAGE

of Disbursements

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CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page				
AME OF COMMITTEE (In OU ANN FOR CO				Transac	tion ID : SC/10.4130			
LOAN SOURCE Full N LOU ANN FOR C	•	Idle Initial)		🗌 Memo Item	Election: 2012 X Primary General			
Mailing Address 6213 CHARLOTTE AVE	SUITE 112				Other (specify)			
City NASHVILLE		State TN	ZIP Code 37209	e	X Personal Funds of the Candidat			
Original Amount of Lo	an 15000.00	Cumulative Pa	lyment To D	Date Bala	nce Outstanding at Close of This Perio			
TERMS Date Inc M05 ^M /	v ž01ž v		Date Due	Interest Rate (If none, enter 01/2020 ^Y 0.0	0)			
List All Endorsers or 1. Full Name (Last, Fi		o Loan Source		Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·			
2. Full Name (Last, First	st, Middle Initial)			Name of Employer				
Mailing Address			_	Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y			
3. Full Name (Last, Fire	st, Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y			
4. Full Name (Last, Fire	st, Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	g 1 1 g 1 1 a 1			
UBTOTALS This Period				H	, 15000.00			
	page in this line only)			vard to appropriate line			

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-			Г		PAGE 6 OF 8
CHEDULE C (FEC Form 3) OANS				Use separate schedul for each category of Detailed Summary Pa	the (check only one) × 13a
ME OF COMMITTEE (In Fu OU ANN FOR CONC	,			Transa	ction ID : SC/10.4131
LOAN SOURCE Full Nam	•	dle Initial)		Memo Item	Election: 2012 X Primary General
Mailing Address 6213 CHARLOTTE AVE SUI	TE 112				Other (specify)
City NASHVILLE		State TN	ZIP Code 37209		Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	yment To Da	ate Bal	ance Outstanding at Close of This Peric
<u> </u>	200000.00			0.00	200000.00
TERMS Date Incurre	ed	Γ	Date Due	Interest Rat (If none, ente	
M06 ^M / D29 ^D / Y	2012	M M / D D	01/0	1/2Ŏ20 [×] 0	.00 % (apr) Yes 🗶 No
List All Endorsers or Gua 1. Full Name (Last, First,		b Loan Source		lame of Employer	
• • • •					
Mailing Address				Decupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	7 7 7 7
2. Full Name (Last, First, M	/iddle Initial)		٩	lame of Employer	
Mailing Address			C	Decupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	· · · · · · · · · · · · · · · · · · ·
3. Full Name (Last, First, N	/liddle Initial)		٩	lame of Employer	
Mailing Address			C	Occupation	
City	State	ZIP Code	0	Amount Guaranteed Dutstanding:	-y
4. Full Name (Last, First, M	/liddle Initial)		٩	lame of Employer	
Mailing Address			C	Occupation	
City	State	ZIP Code	0	Amount Guaranteed Dutstanding:	g 1 1 g 1 1 x 1
JBTOTALS This Period This				·	200000.00

CHEDULE C (FEC Form 3) DANS			Use separate schedule for each category of th Detailed Summary Pag	he (check only one) X 13a			
AME OF COMMITTEE (In Full) OU ANN FOR CONGRESS			Transac	ction ID : SC/10.4132			
LOAN SOURCE Full Name (Last, First, Mid LOU ANN FOR CONGRESS	dle Initial)		🗌 Memo Item	Election: 2012 Primary General			
Mailing Address 6213 CHARLOTTE AVE SUITE 112				Other (specify) v			
City NASHVILLE	State TN	ZIP Code 37209	3	Personal Funds of the Candidate			
Original Amount of Loan 8000.00	Cumulative Pag	yment To D	ate Bala	ance Outstanding at Close of This Period 8000.00			
TERMS Date Incurred	<u> </u>	Date Due	Interest Rate (If none, enter				
M08 ^M / D01 ^D / Y Ž01Ž Y	M M / D D	⁷ Y01/0		00			
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	y			
2. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
City State	ZIP Code		Amount Guaranteed Outstanding:	y y			
3. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
City State	ZIP Code		Amount Guaranteed Outstanding:	y y y y			
4. Full Name (Last, First, Middle Initial)		1	Name of Employer				
Mailing Address			Occupation				
City State	ZIP Code		Amount Guaranteed Outstanding:	y			
UBTOTALS This Period This Page (optional)				8000.00			

					PAGE 8 OF 8			
SCHEDULE C (FEC Form 3) LOANS				Use separate schedule(s) for each category of the Detailed Summary Page				
AME OF COMMITTEE (In Full) OU ANN FOR CONG				Transac	tion ID : SC/10.4133			
LOAN SOURCE Full Name	•	dle Initial)		Memo Item	Election: 2012 X Primary General			
Mailing Address 6213 CHARLOTTE AVE SUITE	E 112				Other (specify) v			
City NASHVILLE		State TN	ZIP Code 37209	9	X Personal Funds of the Candidate			
Original Amount of Loan	5000.00	Cumulative Pa	yment To D	0.00 Bala	nce Outstanding at Close of This Period 5000.00			
TERMS Date Incurred M08 ^M / 21 ^D /	Ž01Ž ^Y	M M / D D	Date Due	Interest Rate (If none, enter 01/2020 ^Y 0.				
List All Endorsers or Guara 1. Full Name (Last, First, M		Loan Source	1	Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y			
2. Full Name (Last, First, Mi	ddle Initial)			Name of Employer				
Mailing Address				Occupation Amount				
City	State	ZIP Code		Guaranteed	y			
3. Full Name (Last, First, Mi	ddle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
4. Full Name (Last, First, Mi	ddle Initial)	ļ		Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y			
SUBTOTALS This Period This	Page (optional)			······	5000.00			
TOTALS This Period (last page	in this line only)		······ •	228000.00			
Carry outstanding balance only	y to LINE 3, Sch	edule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.			