FEC FORM 3

1020593148

FE5AN018

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

2011 APR 15 PM 2: 25

FEC MAIL CENTER
Office Use Only

1.	NAME OF		
	COMMITTEE	(in	full

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

ADDRESS (number and street) Check if different than previously [5,4,1] [5,4,1] [5,4,1]	EAST, MENDENHAL		7.1.5]-
reported. (ACC) FEC IDENTIFICATION NUMBER COO493189	3. IS THIS NEW REPORT (N) OR	STATE AMENDED (A)	ZIP CODE STATE V DISTRICT
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q2)		General (12G) Special (12S)	Runoff (12R) in the State of
January 31 Year-End Report (Y Termination Report (TER)	General (30G) M M / D D Election on	Runoff (30R)	Special (30S) in the State of
i. Covering Period DZ 1 1	* ZO' L' (through Ø	ま′まし′ 20	ŏ ľ ľ
Type or Print Name of Treasurer FRA	omplete information may subject the person sign	Date Date Date	20 Li

of Receipts and Disbursements

Write or Type Committee Name

FRANKE FOR CONGRESS

Report Covering the Period:

То:

		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	, 10,823,87	, 10,823.87
	(b) Total Contribution Refunds (from Line 20(d))	y y •	,
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	, 10,823.87	, 10,823.87
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	, 1,639.95	, 1,63995
	(b) Total Offsets to Operating Expenditures (from Line 14)	y y *	, , , , , , , , , , , , , , , , , , ,
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	, 1,639.95	, 1,639.95
8.	Cash on Hand at Close of Reporting Period (from Line 27)	, 9,18392	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	, , , , , , , , , , , , , , , , , , ,	

For further information contact:

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

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

Write or Type Committee Name

FOR CONGRESS FRANKE

Report Covering the Period:

From:

52'15'201'1'

03'31'2011 To:

		I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date							
11.	СО	NTRIBUTIONS (other than loans) FROM:									
	(a)	Individuals/Persons Other Than									
		Political Committees	9,310,00		93104						
		(i) Itemized (use Schedule A)	, (,5(0,00	, ,	4,310.00						
		(ii) Uniternized	, ,	y	, .						
		(iii) TOTAL of contributions		•	·						
		from individuals	, ,	. ,	· y •						
	(b)	Political Party Committees	7 7	. ;	,						
	(c)	Other Political Committees		,							
		(such as PACs)	y ,	• ,	• •						
	(d)	The Candidate	, 1,513.87		1,513.87						
	(e)	TOTAL CONTRIBUTIONS	, , , , , , , , , , , , , , , , , , , ,	7	1,0.00						
	ν-,	(other than loans)									
		(add Lines 11(a)(iii), (b), (c), and (d))	, 10,823.81	, ,	10,823.87						
12.	TR/	ANSFERS FROM OTHER									
	ΑU	THORIZED COMMITTEES	y y. *	, ,	, .						
	10	ANS:									
13.	(a)	ANS: Made or Guaranteed by the									
	(-/	Candidate	er er er er	,	, .						
				,	•						
	(b)	All Other Loans	, , , , , , , , , , , , , , , , , , ,	,	, .						
	(c)	TOTAL LOANS									
		(add Lines 13(a) and (b))	· • • • • • • • • • • • • • • • • • • •	. 7	3 .						
14.	OF	FSETS TO OPERATING									
		PENDITURES	the state of the s								
	(Re	funds, Rebates, etc.)	, ,	,	, .						
15.	от	HER RECEIPTS									
		ridends, Interest, etc.)	, , , , , , , , , , , , , , , , , , ,	,	, "						
16.	TO	TAL RECEIPTS (add Lines		•	•						
	11(e), 12, 13(c), 14, and 15) rry Total to Line 24, page 4)	, 10,82387		10,823.87						
	(Ca	my lotal to Line 24, page 4)	, , , , , , , , , , , , , , , , , , , ,	,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	, 1,639.95	, 1,639.95
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES		*
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	• • • • • • • • • • • • • • • • • • •	, , , , , , , , , , , , , , , , , , ,
	(b) Of All Other Loans	· · · · · · · · · · · · · · · · · · ·	, ,
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))		
	(add Lines 19(a) and (b))	•	, , ,
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees		
	That I shick something		, ,
	(b) Political Party Committees	y	• • • • • • • • • • • • • • • • • • •
	(c) Other Political Committees (such as PACs)		
	(525) 25 1 1 1 5 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. , y , , y	, , , ,
	(d) TOTAL CONTRIBUTION REFUNDS		
	(add Lines 20(a), (b), and (c))	y	, , ,
		en e	
21.	OTHER DISBURSEMENTS	y y •	, , .
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	, 1,639.95	, 1,639.95
	m. Cash s	UMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	DRTING PERIOD	, , , – .00
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	, 10,823.87
25.	SUBTOTAL (add Line 23 and Line 24)		, 10,823.87
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	, 1,639.95
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		, 9,183.92

1030503152

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOI	RLINE	NUMBER:	PAGI	<u> </u>	<u> </u>
(che	eck only	one)			
]11a	11b	11c	11d	
	12	13a	13b	14	15

ITEMIZED RECEIPTS	Detailed Summary Page	11a 11b 11c 11d 12 13a 13b 14 15									
	d Statements may not be sold or used by any per the name and address of any political committee	rson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)	THRE FOR CONGRESS										
Full Name (Last, First, Middle Initial) A. SEE ATTI Mailing Address	Ached	Date of Receipt м м / ס ס ע Y Y Y Y									
City	State Zip Code										
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period									
Name of Employer	Occupation	. • و و									
Receipt For: Primary General Other (specify)	Election Cycle-to-Date										
Full Name (Last, First, Middle Initial)		Date of Receipt									
Mailing Address		мм/оо/үүү									
City	State Zip Code										
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period									
Name of Employer	Occupation	, , , , , , , , , , , , , , , , , , ,									
Receipt For: Primary General Other (specify)	Election Cycle-to-Date										
Full Name (Last, First, Middle Initial)		Date of Receipt									
C. Mailing Address		мм / оо / ү ү ү									
City	State Zip Code										
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period									
Name of Employer	Occupation	• · · • • · · · · · · · · · · · · · · ·									
Receipt For: Primary General Other (specify)	Election Cycle-to-Date										
SUBTOTAL of Receipts This Page (options)											
TOTAL This Period (last page this line numb		, ,									

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SCHEDULE B (FEC Form 3)	Hoo comments ask-dide/-\	FOR LINE NUMBER: PAGE OF
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of The	(check only one)
IEMILED DISDURSEMIEN IS	Detailed Summary Page	17 18 19a 19b 20a 20b 20c 21
Any information copied from such Reports and Statements m		person for the purpose of soliciting contributions
or for commercial purposes, other than using the næme and a		
NAME OF COMMIFTEE (In Full)		
FRANKE F	or Congres	5 5
Full Name (Last, First, Middle Initial)		Bay of Birl
SEE ATTACHEI		Date of Disbursement
Mailing Address		M M / D D / Y Y Y
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
		,
Candidate Name	Category	/
Office Sought: House Disbursement For	Туре	_
Senate Primary	General	
President Other (s	pecify)	
State: District: Full Name (Last, First, Middle Initial)		
the state of the s		Date of Disbursement
		M M / D D / Y Y Y
Mailing Address		
City State	Zip Code	Amount of Each Disbursement this Period
		Validati di Ladi Disbuisdificii ulis Fellou
Purpose of Disbursement		j , , , , , , , , , , , , , , , , , , ,
Candidate Name		4
	Category Type	
Office Sought: House Disbursement For	_	
Senate Primary President Other (s	General pecify)	
State: District:	r"J	
Full Name (Last, First, Middle Initial)		
).		Date of Disbursement
Mailing Address		M M / D D / Y Y Y
City State Zi	o Code	Amount of Each Disbursement this Period
Purpose of Disbursement		_
		3. 3
Candidate Name	Category	v
Office Sought: House Disbursement For	Туре	
Office Sought: House Disbursement For Senate Primary	General	
President Other (s	L_J	
State: District:	····	
SUBTOTAL of Disbursements This Page (optional)		

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

Candidate Contributions

Thomas Agnew Edward Stafman	George Kittrell	Lane Larson	Jane Trethaway	Jack Trethaway	Keith Kelly	Chris Taylor	Individual Contri	Total Contributions over \$200	James Hunt	Ellen Kriegbaum	Susan McGrath	Robert Campbell	Carolyn Squires	Casey Morgan	Michael Cok	Geoff Stephens	Billy Smith	Individual Contri	Total Candidate Contributions	Insty Prints	Winslow Studios	Winslow Studios	Run and Win	Run and Win
Self Beth Shalom	USFS		MSU	City of Havre	State Montana	Holer Museum	Individual Contributors under \$200	over \$200	Lawyer	retired	Investor	Professor	retired	self	self	self	MSU	Individual Contributors over \$200	tributions	39 South Tracy Ave	16 South Tracy Ave	16 South Tracy Ave	PO Box 2096	PO Box 2096
Rancher Rabbi	Ranger		Professor	Firefighter	Comm Labor and Industry	Exec Dir			Self	MSU	Self employed	Montana State University		attorney	attorney	film maker	Professor			Bozeman, MT 59715	Bozeman, MT 59715	Bozeman, MT 59715	Aiken, SC 29802	Aiken, SC 29802
781 Lower Sweet Grass Rd 515 W. Cleveland St	1437 Ash Dr	1417 Cedar Canyon Rd	1358 Blvd Ave	1358 Blvd Ave	7683 Hwy	730 Stuart St			310 East Broadway	3550 Blackwood Rd	825 South 5th	411 West Koch	2111 South 10th West	708 Evening Star Lane	3300 Harper-Puckett Rd	205 S. Church St	602 S. 6th Ave							
	Bozeman, MT 59715	Billings, MT 59101	Havre, MT 59501	Havre, MT 59501	Helena, MT 59601	Helena, MT 59601			Helena, MT 59601	Bozeman, MT 59718	Bozeman, MT 59715	Bezeman, MT 59715	Missoula, MT 59801	Bozeman, MT 59715	Bozeman, MT 59715	Bozeman, MT 59715	Bozeman, MT 59715							
200 180	200	100	100	100	100	50		3100	500	500	500	250	250	300	250	300	250		1513.87	216.87	50	150	301	796

Loren Acton	Doug Neil	Joe Gutkoski	Margie MacDonald	Joe Cohenour	Adele Pitendrigh	Mary McNally	Tim Furey	Nancy O'Neil	Carson Taylor	Carlie Boland	Gary Branae	Kathy Crawford	Ronald Tobias	Jake Werner	Virginia Court	Kathleen Williams	Ray Peck	Carla Johnson	Frank Smith	Jean Price	Kathleen Cholewa	Diane Sands	John Board	Bonnie Bowler	Denalie Bruins	David Stanley	Michael Brintnall	Linda Young	Carol Lee Roark	Robyn Driscoll
retired	Great Falls	retired	West Sts Org Res Counc organizer	State MT	retired	faculty			self	self	retired	faculty	faculty	broker	retired		retired		self	self	self	faculty	retired	retired		retired	APSA	MSU	Hylaite Environmental	Billings Public Schools
Ċ	firefighter		າc organizer	law enforcement		MSU-Billings			mediator	fitness expert		MSU	MSU	D.A. Davidson						artist	writer	M					E	Professor	Scientist	Community Ed Coordinator 404 Houle Dr
PO Box 1857	3216 5A St NE	304 N 18th	411 June Drive	2610 Colt Dr	118 Erik Dr	415 Avenue D #102	280 Hellgate Drive	748 Rosa Way	8 W. Harrison St	1215 6th Ave	415 Yellowstone	1300 Dry Creek Rd	7205 Lorelei Dr	8374 Goldenstein Lane	18 Heatherswood Lane	28 Golden Trout Way	2412 Columbia Ave	PO Box 1284	PO Box 729	422 15th St South	727 Hillsdale St	4487 Nicole Ct	2704 Gold Rush Ave	807 E. 6th St	9350 Keegan Trail	1010 Swenglory Rd	1 Ericsson Rd	7203 Lorelei Dr		r 404 Houle Dr
Bozeman, MT 59771	Great Falls, MT 59405	Bozeman, MT 59715	Billings, MT 59101	East Helena, MT 59635	Bozeman, MT 59715	Billings, MT 59101	Missoula, MT 59808	Bozeman, MT 59715	Bozeman, MT 59715	Great Falls, MT 59405	Billings, MT 59101	Belgrade, MT 59714	Bozeman, MT 59715	Bozeman, MT 59715	Billings, MT 59101	Bozeman, MT 59715	Helena, MT 59601	Havre, MT 59501	Poplar, MT 59255	Great Falls, MT 59405	Helena, MT 59601	Missoula, MT 59803	Helena, MT 59601	Helena, MT 59601	Missoula, MT 59808	Livingston, MT	Cabin John, MD 20818	Bozeman, MT 59715	Gallatin Gateway, MT 59730	Billings, MT 59101
50	100	100	50	100	200	100	50	50	200	50	30	100	200	200	100	50	100	50	100	50	100	100	100	100	60	100	50	100	100	50

Total Contributions under \$200	Joseph Theil	Anne Marie Quinn	Janis Strout	Angela Goodhope	Gordon Levin	Edwin Taylor	Julie Novkov	Martha Bailey	Norman Bishop	William Geer	Peter Kommers	Rose Toth	Denise Hayman	Mx Diebert	Jeanne-Marie Souvigney	Lorelei Kelly	Cathy Conover	Gail Richardson	Cynthia Burack	Kathleen Chafey	Judith A. Garber	Barry Sulam	Ross Prosperi	Kent Madin	Ron Pamm Davis	Jack Jane Jelinski	Dorothy Eck	Elizabeth Danforth	Margaret Conway
der \$200	Student	Scientist	adjunct faculty	stay at home mom	Scientist	Assistant Professor	Professor ·	Adjunct Professor	Not employed	Fish & Wildlife Consulta Self employed	Professor Emeritus	Not employed	Consultant	Not employed	consultant	Program Director	org development spec	naturalist guide	academic	Retired	professor	retired	Community Organizer	self	self	retired	retired	Director Women's Cent(MSU	faculty
	MSU	Montana Molecular	Montana State University	my life	ARCADIS US Inc.	Missouri Western State University	University at Albany, SUNY	Webster University	none	Self employed	Montana State University	none	self	none	self	Cntr Arms Control & Non Prolif	MMEC	self	ohio state university	Retired	University of Alberta	retired	Montana Conservation Voters	adventure guide	chiropractor			I MSU	University of Florida
						iversity										rolif							ters	14543 Kelly Canyon Rd	2715 Axtell-Anceny Rd	433 n Tracy	10 W. Garfield	PO Box 884	PO Box 357242
	Bozeman, MT 59717	Bozeman, MT 59715	Bozeman, MT 59715	Kitchikan, AK 99901	Helena, MT 59601	St. Joseph, MO 64503	Loudonville NT 12211	St. Louis, MO 63119	Bozeman, MT 59715	Lolo, MT 59847	Bozeman, MT 59715	Bozeman, MT 59715	Bozeman, MT 59715	Bozeman, MT 59715	Livingston, MT 59047	Washington, DC 20009	Bozeman, MT 59718	Bozeman, MT 59715	Washington, DC 20024	Bozeman, MT 59718	Edmonton, AB T6B0W4	Bozeman, MT 59772	Missoula, MT 59801	Bozeman, MT 59715	Bozeman, MT 59718	Bozeman, MT 59715	Bozeman, MT 59715	Bozeman, MT 59771	Gainesville, FL 32635-7242
	10	75	25	ن	15	25	100	20	100	100	100	100	100	100	50	50	150	100	20	100	20	25	50	200	100	50	200	100	200

1639.95			Total disbursements
216.87	Bozeman, MT 59715	39 South Tracy Ave	Insty Prints
50	Bozeman, MT 59715	16 South Tracy Ave	Winslow Studios
150	Bozeman, MT 59715	16 South Tracy Ave	Winslow Studios
301	Aiken, SC 29802	PO Box 2096	Run and Win
796	Aiken, SC 29802	PO Box 2096	Run and Win
126.08	ng fees	contribution processing fees	Act Blue
			Expenses
10823.87		ĬŠ	Total Contributions

On hand end of report

9183.92

11030505158

SCHEDULE C (FEC Form 3) NONE LOANS

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

FOR LINE NUMBER: (check only one)

PAGE

e number:	
nly one)	13a
	13b

OF

OAN SOURCE Full Nar	ne (Last, First, Mic	ldle Initial)	Election: Primary
Mailing Address			General Other (specify) ▼
City		State ZII	P Code
Original Amount of Loan		Cumulative Payme	nt To Date Balance Outstanding at Close of This P
y • • • •			en de la companya de La companya de la co
TERMS Date Incur		Date	
M M / D D /		м м / о /	• % (apr) Yes
List All Endorsers or Gu	arantors (if any) to	Loan Source	
1. Full Name (Last, First,	Middle Initial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First,	Middle Initial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First,	Middle Initial)	 	Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First,	Middle Initial)	· · · · · · · · · · · · · · · · · · ·	Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
BTOTALS This Period Th	ıs Page (optional)		

11030001100

SCHEDULE C-1 (FEC Form 3) NONE LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page of Schedule C

Federal Election Commission, Washington, D.C. 20463				<u> </u>					
NAME OF COMMITTEE (In Full)			FEC	IDE	NTIFI	CATIC	и ис	JMBER	
		1	\sim						
		ł	С						
LENDING INSTITUTION (LENDER)	Amount of Loan				nteres	t Rate	(APR	<u> </u>	
Full Name					1110103		(A) 11	'	
	1							%	
							-		
Mailing Address	Date Incurred or Established	M 1	М	/ 0	ם כ	/ Y	Υ .	Y Y	
			м	, :) D	, y	γ .	, ,	
City State Zip Code	Date Due						-		
			M	/ (ם כ	/ Y	Y	Y Y	
A. Has loan been restructured? No Yes	If yes, date originally incurre	<u> </u>							
B. If line of credit,	Total								
Amount of this Draw:	Outstanding Balance:		,		4	٠.			
C. Are other parties secondarily liable for the debt incu	rrea? nust be reported on Schedule C.	١							
D. Are any of the following pledged as collateral for the			What is the value of this collateral?						
property, goods, regotiable instruments, certificates		***************************************		74.40	, 0 . u.,				
stocks, accounts receivable, cash on deposit, or oth	er oimilar traditional collateral?		,		,				
No Yes If yes, specify:		D 45							
	·	Does the interest		-	_	репе	ctea s Yes	ecurity	
E. Are any future contributions or future receipts of inte	erest income, pledged as								
collateral for the loan? No Yes If yes,	_	What is	What is the estimated value?						
					,		_		
	Location of consumt	· · · · · · · · · · · · · · · · · · ·							
A depository account must be established pursuant	Location of account:								
to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Address:								
Date account established:									
	City, State, Zip:								
F. If neither of the types of collateral described above	was pledged for this loan, or if	the amou	nt pl	edge	d doe	s not	equal	or	
exceed the loan amount, state the basis upon which	n this loan was made and the ba	asis on wi	hich	it as	sures	repayr	nent.		
G. COMMITTEE TREASURER		DAT	E						
Typed Name		м		/ 1	D D '	/ Y	Y	Y Y	
Signature		1.							
H. Attach a signed copy of the loan agreement.	<u> </u>								
I. TO BE SIGNED BY THE LENDING INSTITUTION:	······································								
I. To the best of this institution's knowledge, the	terms of the loan and other info	rmation r	egar	ding	the ex	tensio	n of t	he loan	
are accurate as stated above. II. The loan was made on terms and conditions (i	including interest rate) no more t	favorable	at th	a tim	a thai	thoe	a ima	seed for	
similar extensions of credit to other borrowers	of comparable credit worthiness	i.					•		
III. This institution is aware of the requirement that complied with the requirements set forth at 11	t a loan must be made on a bas CFR 100.82 and 100.142 in ma	sis which king this	assı loan	ures I	epayn	nent, a	ind ha	s	
AUTHORIZED REPRESENTATIVE									
Typed Name		DAT		, ,	ם כ	, v	¥	, , l	
	itle			. '			•	•	
1		Į.						• •	

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS	NO	NE
DEBTS AND OBLIGATIONS	14.	•

(Use separate

PAGE OF

_	AND OBLIGATIONS OF THE PROPERTY OF THE PROPERT	,	schedule(s) for each numbered line)	FOR LINE NUMBER (check only one)	₹:
	COMMITTEE (In Full)			<u> </u>	
A. Fu	Il Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of D	Debt (Purpose):	
Mailing	a Address				
City	State	Zip Code			
Outs	standing Balance Beginning This Period				
	Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close	of This Period
l	grand grand was some	n na sega na pagamana na se	e:	, ,	•
B. Full	Name (Last, First, Middle Initial) of Debtor of	or Creditor	Nature of D	Debt (Purpose):	
Mailing	Address				
City	State	Zip Code			
Outs	standing Balance Beginning This Period	Daywood Tale Daried	0.444	ing Delayer at Olege	of This Paris d
<i>;</i> ·	Amount Incurred This Period	Payment This Period		ing Balance at Close	or Inis Penoa
		. 19. 11. 14. 17. 1. 1		<u> </u>	•
C. Fu	Il Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of I	Debt (Purpose):	
Mailing	Address				
City		State Zip Code			
Outs	standing Balance Beginning This Period				
	Amount Incurred This Period	Payment This Period		ing Balance at Close	of This Period
	• The state of the			· · · · · · · · · · · · · · · · · · ·	•
SUBT	TOTALS This Period This Page (optional)		>	, ,	•
TOTA	ALS This Period (last page this line number of	only)	>	, ,	• 1
TOTA	L 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)

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