PAGE 1 / 17

REPORT OF RECEIPTS **AND DISBURSEMENTS**

FORIVI 3	For An Authorize	d Committee	Offic	ce Use Only
NAME OF TYPE COMMITTEE (in full)	OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
Committee to Elect Vance				
	O. Box 4578			
ADDRESS (number and street) ▼				
Check if different than previously reported. (ACC)	nroe		LA 712	11
2. FEC IDENTIFICATION NUMBE		TY ▲	STATE ▲	ZIP CODE ▲
C C00549352	3. IS 1	THIS NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT (Choose C	One) (b) 12-E	Day PRE -Election Report for the	: :	
(a) Quarterly Reports:		Primary (12P)	General (12G)	Runoff (12R)
April 15 Quarterly Report		Convention (12C)	Special (12S)	
July 15 Quarterly Report Cottober 15 Quarterly Rep	. (00)	etion on	/	in the State of
January 31 Year-End Rep	oort (YE) (c) 30-E	Day POST -Election Report for the	ne:	
		General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Elec	etion on	/ Y " Y " Y " Y	in the State of
5. Covering Period 07	01 / Y Y Y 2022		9 30 Y	y y y 2022
I certify that I have examined this Rep W Type or Print Name of Treasurer	port and to the best of atkins, Nancy, H., ,	of my knowledge and belief it is	s true, correct and co	mplete.
Watkins, No. Signature of Treasurer	ancy, H., ,	[Electronically Filed]	Date 10	07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, erroneous, o	or incomplete informati	on may subject the person signir	ng this Report to the pe	enalties of 52 U.S.C. §30109
Office Use Only			F	FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 17

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Committee to Elect Vance McAllister

2022 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 0.00 0.00 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 0.00 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 0.00 Reporting Period (from Line 27)..... 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 960959.09 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 / 17

Write or Type Committee Name

Committee to Elect Vance McAllister

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
11. C	ONTRIBUTIONS (other than loans) FROM:			
(a	Political Committees	0.00	0.00	
	(i) Itemized (use Schedule A)	3.00	0.00	
	(ii) Unitemized	0.00	0.00	
	(iii) TOTAL of contributions from individuals	0.00	0.00	
(b		0.00	0.00	
(C	(such as PACs)	0.00	0.00	
(c (∈	TOTAL CONTRIBUTIONS	0.00	0.00	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00	
	RANSFERS FROM OTHER UTHORIZED COMMITTEES	0.00	0.00	
3. L	OANS:			
(a	Made or Guaranteed by the Candidate	0.00	0.00	
(b	<u></u>	0.00	0.00	
(0	(add Lines 13(a) and (b))	0.00	0.00	
	FFSETS TO OPERATING XPENDITURES			
	Refunds, Rebates, etc.)	0.00	0.00	
	THER RECEIPTS Dividends, Interest, etc.)	0.00	0.00	
1	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	0.00	0.00	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 17

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	0.00
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
		0.00	0.00
	(c) Other Political Committees	0.00	7 7 7
	(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)	0.00	0.00
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	0.00
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		0.00
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	0.00

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

PAGE 5
FOR LINE NUMBER: (check only one)

X 13a 13b

OF

NAME OF COMMITTEE (In Full)	lliata :	Transaction ID : SC/10.4543
Committee to Elect Vance McA LOAN SOURCE Full Name (Last, First		Memo Item Election: 2013
McAllister, Vance, Michael, ,		Primary General
Mailing Address 2460 Highway 594	X Other (specify) ▼ Special-General	
City	State	ZIP Code Z1202 X Personal Funds of the Candidate
Monroe	LA	71203
Original Amount of Loan 50000.00	Cumulative Pay	yment To Date Balance Outstanding at Close of This Period 0.00 50000.00
TERMS Date Incurred	D	Date Due Interest Rate Secured:
M10M / D03D / Y Ž01Š Y	M M / D D	/ Y NONĚ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if a		
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	te ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	te ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	te ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	te ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optio	nal)	50000.00
TOTALS This Period (last page in this line	only)	
Carry outstanding balance only to LINE 3	, Schedule D, for this	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

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

17

13b Transaction ID: SC/10.4525 NAME OF COMMITTEE (In Full) Committee to Elect Vance McAllister LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2013 Memo Item Primary McAllister, Vance, Michael, , General Mailing Address 2460 Highway 594 Other (specify) Special-General City State ZIP Code X Personal Funds of the Candidate LA 71203 Monroe Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 40000.00 0.00 40000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10^M 0.00 ^D10^D ž013 NONĚ 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)..... 40000.00 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

PAGE 7
FOR LINE NUMBER: (check only one)

X 13a 13b

OF

LOAN SOURCE Full Nam McAllister, Vance, M		Idle Initial)	☐ Memo Ite	Election: 2013 Primary General
Mailing Address 2460 Highway 594	★ Other (specify) ▼ Special-General			
City		State	ZIP Code	Personal Funds of the Candidate
Monroe		LA	71203	reisonal runus of the Candidate
Original Amount of Loan		Cumulative Pa	ment To Date E	Balance Outstanding at Close of This Period
, , ,	19900.00		15000.00	4900.00
TERMS Date Incurre	d	Γ	ate Due Interest F	
M10M / D17D / Y	ž013 ^Y	M M / D D	/ Y NONE Y	0.00 % (apr) Yes X No
List All Endorsers or Gua	rantors (if any) to	o Loan Source		
1. Full Name (Last, First, I	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
la l		Amount Guaranteed		
City State ZIP Code			Outstanding:	, , , , , , , , ,
2. Full Name (Last, First, M	fiddle Initial)		Name of Employer	
Mailing Address			Occupation	
	1_	T	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	9 9
3. Full Name (Last, First, M	fiddle Initial)		Name of Employer	
Mailing Address			Occupation	
	ı		Amount	
City	State	ZIP Code	Guaranteed Outstanding:	y y x
4. Full Name (Last, First, N	liddle Initial)	'	Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	9 9 9 9
JBTOTALS This Period This	Page (optional)		······	4900.00
				
PIALS This Period (last pag	e in this line only	')	······	

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

PAGE 8 FOR LINE NUMBER: **X** 13a (check only one)

		Detailed Garrinary 1	13b		
NAME OF COMMITTEE (In Full)		Transa	action ID : SC/10.5356		
Committee to Elect Vance McA	llister				
LOAN SOURCE Full Name (Last, First	, Middle Initial)	Memo Iter	n Election: 2013		
McAllister, Vance, Michael, ,		_ Memo ner	Primary		
			General		
Mailing Address 2460 Highway 594					
	1 -	T			
City	State	ZIP Code	Personal Funds of the Candidate		
Monroe	LA	71203	Fersonal Funds of the Candidate		
Original Amount of Loan	Cumulative Pa	yment To Date Ba	alance Outstanding at Close of This Period		
30100.00		0.00	20100.00		
30100.00		0.00	30100.00		
TERMS Date Incurred	Г	Date Due Interest Ra			
M10M / D17D / Y Z013 Y	M M / D D	(If none, ent	0.00		
10 17 2013		NONE	% (apr) Yes X No		
List All Endorsers or Guarantors (if a	ny) to Loan Source				
1. Full Name (Last, First, Middle Initial)	Name of Employer			
Mailing Address		Occupation			
		Amount			
City	te ZIP Code	Guaranteed			
		Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
Walling Address			Occupation		
		Amount			
City	te ZIP Code	Guaranteed Outstanding:	9 9		
3. Full Name (Last, First, Middle Initial)		Name of Employer			
o. I dii Name (Last, 1 list, Middle lilital)		Traine of Employer			
Mailing Address		Occupation			
		Amount			
City Sta	te ZIP Code	Amount Guaranteed			
Oity	211 0000	Outstanding:	7		
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Addungs		Occupation			
Mailing Address		Occupation			
		Amount			
City	te ZIP Code	Guaranteed			
		Outstanding:	,		
SUBTOTALS This Period This Page (option	nal)	······	30100.00		
<u> </u>					
TOTALS This Period (last page in this line	only)	······	7 7 7		
Carry outstanding balance only to LINE 3	Schodule D. for thi	e line If no Cahadula D. sawer fa	rward to appropriate line of Commercia		
varry outstanding palance only to LINE 3	, scriedule D, for this	s inte. Il 110 Schedule D, Carry 10	iwaiu to appropriate line of Summary.		

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

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

17

13b Transaction ID: SC/10.4527 NAME OF COMMITTEE (In Full) Committee to Elect Vance McAllister LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2013 Memo Item Primary McAllister, Vance, Michael, , General Mailing Address 2460 Highway 594 Other (specify) Special-General City State ZIP Code Personal Funds of the Candidate LA 71203 Monroe Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 20000.00 0.00 20000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10^M 0.00 D 18D ž013 NONĚ 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)..... 20000.00 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 10

X 13a

OF

NΑ	ME OF COMMITTEE (In Full)				Transa	ction ID : SC/10.4309	
C	committee to Elect Vance N	1cAlliste	er				
	LOAN SOURCE Full Name (Last, McAllister, Vance, Michae	☐ Memo Item	Primary				
	Mailing Address 2460 Highway 594		General Control Con				
	City		State	de	Devenuel Funds of the Condidate		
	Monroe		LA	71203		Personal Funds of the Candidate	
	Original Amount of Loan		Cumulative Pay	yment To	Date Bal	ance Outstanding at Close of This Period	
	75000	0.00	9		0.00	75000.00	
	TERMS Date Incurred		C	ate Due	Interest Rat (If none, ente		
	M10 ^M / D29 ^D / Y Ž013	Y	M M / D D	/ Y	NONÉ Y	.00 % (apr) Yes X No	
	List All Endorsers or Guarantors	(if any) to	o Loan Source				
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer		
	Mailing Address				Occupation		
	City	State	ZIP Code		Amount Guaranteed Outstanding:	9 9 9	
	2. Full Name (Last, First, Middle Initial)				Name of Employer		
	Mailing Address				Occupation		
					Amount Guaranteed		
	City	State	ZIP Code			9 9	
	3. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation		
	City	State	ZIP Code		Amount Guaranteed		
	4. Full Name (Last, First, Middle In	itial)			Outstanding: Name of Employer	7	
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7 7 7	
S	UBTOTALS This Period This Page (optional)				75000.00	
	OTALS This Period (last page in this					1000.00	
ı C	arry outstanding balance only to Ll	NE 3, Sch	edule D, for this	s line. If	no Schedule D, carry for	ward to appropriate line of Summary.	

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

PAGE 11 OF FOR LINE NUMBER: **X** 13a (check only one)

17

13b Transaction ID: SC/10.4577 NAME OF COMMITTEE (In Full) Committee to Elect Vance McAllister LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2013 Memo Item Primary McAllister, Vance, Michael, , General Mailing Address 2460 Highway 594 ✗ Other (specify) ▼ Runoff City State ZIP Code Personal Funds of the Candidate LA 71203 Monroe Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 175000.00 0.00 175000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 M 1 1 M D05D ž013 NONĚ 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)..... 175000.00 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

PAGE 12 FOR LINE NUMBER: **X** 13a (check only one)

		Detailed Gui	minary rage	13b
AME OF COMMITTEE (In Full) Committee to Elect Vance McAllist	or	•	Transaction ID : SC/10.5692	
Committee to Elect varice wichinst	еі			
LOAN SOURCE Full Name (Last, First, Mic McAllister, Vance, Michael, ,	ddle Initial)	□ N	Memo Item Election: 2014 X Primary General	
Mailing Address 2460 Highway 594			Other (specify) ▼	
City	State	ZIP Code	Y Personal Funds of the Ca	n didata
Monroe	LA	71203	Personal Funds of the Ca	ndidate
Original Amount of Loan	Cumulative Pay	ment To Date	Balance Outstanding at Close of This	s Period
250000.00		0.00	250000.0	0
TERMS Date Incurred	D		nterest Rate Secured:	
M08M / D21D / Y Z014 Y	[™] 08 ^M / ^D 21 ^D	/ Y Ž018 Y	0.00 % (apr) Yes	x No
List All Endorsers or Guarantors (if any) t	o Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Emplo	oyer	
Mailing Address		Occupation		
		Amount Guaranteed		1
City	ZIP Code	Outstanding:	7 7 7	1
2. Full Name (Last, First, Middle Initial)		Name of Emplo	oyer	
Mailing Address		Occupation		
		Amount Guaranteed		1
City State	ZIP Code	Outstanding:	9 9	ı
3. Full Name (Last, First, Middle Initial)		Name of Emplo	oyer	
Mailing Address		Occupation		
		Amount Guaranteed		
City State	ZIP Code	Outstanding:	7 7 7	1
4. Full Name (Last, First, Middle Initial)	'	Name of Emplo	oyer	
Mailing Address		Occupation		
		Amount		1
City	ZIP Code	Guaranteed Outstanding:		1
SUBTOTALS This Period This Page (optional).			> 250000.0	0
				#
FOTALS This Period (last page in this line only	y)		·	
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	line. If no Schedule D.	carry forward to appropriate line of Sum	ımarv.

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

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

13a 13b

	ME OF COMMITTEE (In Full) ommittee to Elect Vance N	1cAllist	er		Tra	nsaction ID : SC/10.5703	
	LOAN SOURCE Full Name (Last, McAllister, Vance, Michae		ddle Initial)		☐ Memo	Item Election: 2014 Primary General	
	Mailing Address 2460 Highway 594					Other (specify)	
-	City Monroe		State	ZIP Co		Personal Funds of the Candidate	
-	Original Amount of Loan		Cumulative Pay			Balance Outstanding at Close of This Period	
	150000	0.00			0.00	150000.00	
-	TERMS Date Incurred		D	ate Due	Interest (If none,		
	M08 ^M / D21 ^D / Y Ž014	Υ	[™] 08 ^M / ^D 21 ^D	/ Y	Ž018 ^Y	0.00 % (apr) Yes No	
	List All Endorsers or Guarantors	(if any) t	o Loan Source				
	1. Full Name (Last, First, Middle I	nitial)			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 In	itial)			Name of Employer		
	Mailing Address				Occupation		
-	City	State	ZIP Code		Amount Guaranteed Outstanding:	, , , , , , , ,	
	4. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation		
-	City	State	ZIP Code		Amount Guaranteed Outstanding:	9	
sı	JBTOTALS This Period This Page (optional)				150000.00	
	OTALS This Period (last page in this				<u>*</u>	,	
C	arry outstanding balance only to I !!	NE 3. Sch	nedule D. for this	s line. If	no Schedule D. carry	forward to appropriate line of Summary.	
	, Januarania Salarioo oiliy to Eli	0, 001	=, .o. and		cocano b, carry	to appropriate mile of cultimary.	

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

PAGE 14 OF
FOR LINE NUMBER:
(check only one)

13a

			130
AME OF COMMITTEE (In Full) Committee to Elect Vance M	1cAllist	er	Transaction ID: SC/10.5985
LOAN SOURCE Full Name (Last, McAllister, Vance, Michael		ddle Initial)	☐ Memo Item
Mailing Address 2460 Highway 594			Other (specify) ▼
City		State	ZIP Code ZAGOO Personal Funds of the Candidate
Monroe		LA	71203
Original Amount of Loan		Cumulative Pay	ayment To Date Balance Outstanding at Close of This Period
15000	0.00	7	0.00 15000.00
TERMS Date Incurred		D	Date Due Interest Rate Secured: (If none, enter 0)
M10 ^M / D16 ^D / Y Ž014	Υ	M10 M / D16 D	0.00 % (apr) Yes X N
List All Endorsers or Guarantors	(if any) t	o Loan Source	
1. Full Name (Last, First, Middle I	nitial)		Name of Employer
Mailing Address			Occupation
	1		Amount Guaranteed
City	State	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle In	itial)	1	Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle In	itial)	-	Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed
City	State	Zir Code	Outstanding:
NIDTOTAL C This Deviced This Dags /	()		
SUBTOTALS This Period This Page (optional).		15000.00
OTALS This Period (last page in this	line only	/)	810000.00
Carry outstanding balance only to LII	NE 3, Scl	nedule D, for this	is 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 15 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

17

NAME OF COMMITTEE (In Full)

Committee to Flect Vance McAllister

Committee to Elect v	ance	IVICAIIISIEI				
A. Full Name (Last, First, Middle Initial) of De	ebtor or Cred	litor	Nature of Debt (Purpose):			
K&L Gates, LLP			legal services			
Mailing Address 925 Fourth Avenue, #2900						
City	State	Zip Code	_			
Seattle	WA	98104				
Outstanding Balance Beginning This Period	Transaction ID : SD10.5548					
467.49						
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period			
0.00		0.00	467.49			
B. Full Name (Last, First, Middle Initial) of De	btor or Credi	tor	Nature of Debt (Purpose):			
K&L Gates, LLP			legal services			
Mailing Address 925 Fourth Avenue, #2900			-			
City	State	Zip Code	_			
Seattle	WA	98104				
Amount Incurred This Period 0.00		Payment This Period 0.00	Outstanding Balance at Close of This Period 15061.34			
C. Full Name (Last, First, Middle Initial) of De K&L Gates, LLP	ebtor or Cred	litor	Nature of Debt (Purpose): legal services			
Mailing Address 925 Fourth Avenue, #2900						
City	State	Zip Code	_			
Seattle	WA	98104				
Outstanding Balance Beginning This Period			Transaction ID : SD10.5981			
11115.79						
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period			
0.00		0.00	11115.79			
SUBTOTALS This Period This Page (optional	l)		26644.62			
2) TOTALS This Period (last page this line num	ber only) ·····					
3) TOTAL OUTSTANDING LOANS from Sched	ule C (last pa	age only)				
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)						

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

Excluding Loans

NAME OF COMMITTEE (In Full)

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

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PAGE	16	OF	17
E NUMB	BER:	×	9

Committee to Elect	Vance	McAllister		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor K&L Gates, LLP			Nature of Debt (Purpose): legal services	
Mailing Address 925 Fourth Avenue, #290	0			
City Seattle	State WA	Zip Code 98104		
Outstanding Balance Beginning This Per	iod		Transaction ID : SD10.6006	
Amount Incurred This Period	_	Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	7738.79	
B. Full Name (Last, First, Middle Initial) of Nungesser Consulting, LLC	Debtor or Cred	ditor	Nature of Debt (Purpose): fundraising consulting-disputed debt	
Mailing Address 1554 Lobdell Avenue				
City Baton Rouge	State LA	Zip Code 70806		
Outstanding Balance Beginning This Per	iod		Transaction ID : SD10.5639	
46313.58				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	46313.58	
C. Full Name (Last, First, Middle Initial) of Nungesser Consulting, LLC	Debtor or Cre	editor	Nature of Debt (Purpose): fundraising consulting	
Mailing Address 1554 Lobdell Avenue				
City Baton Rouge	State LA	Zip Code 70806		
Outstanding Balance Beginning This Per	iod		Transaction ID : SD10.5640	
214.60				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	214.60	
1) SUBTOTALS This Period This Page (option	onal) ·····		54266.97	
2) TOTALS This Period (last page this line n	umber only) ····		-	
TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

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

Excluding Loans

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

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PAGE	17	OF	17
E NUME nly one)	BER:		9
		· ·	10

	ommittee to Elect V	ance	McAllister		
А	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Red Print Strategy			Nature of Debt (Purpose): campaign consulting	
N	Mailing Address 311 S. Fillmore Street				
	Dity Arlington	State VA	Zip Code 22204		
ľ	Outstanding Balance Beginning This Period			Transaction ID : SD10.5375	
	65000.00				
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
	0.00			65000.00	
Е	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):	
	Robert Watkins & Company			accounting services	
N	Mailing Address 610 S. Boulevard				
	City Fampa	State FL	Zip Code 33606		
	Outstanding Balance Beginning This Period 5047.50		Transaction ID : SD10.6343		
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
	0.00		0.00	5047.50	
C	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mailing Address			Nature of Debt (Purpose):	
N					
C	City	State	Zip Code		
	Outstanding Balance Beginning This Period				
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
	, , , , , , , , , , , , , , , , , , ,		9 9 9		
1)	SUBTOTALS This Period This Page (optional)		70047.50	
2)	2) TOTALS This Period (last page this line number only)			150959.09	
3)	3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)			810000.00	
4)	4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)			960959.09	