

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Southwest Leadership Fund

ADDRESS (number and street) PO Box 25084  
 Check if different than previously reported. (ACC)  
Albuquerque NM 87125

2. **FEC IDENTIFICATION NUMBER** C00471334  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2010 through 01 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Carolyn Gonzales

Signature of Treasurer Electronically Filed by Carolyn Gonzales Date 02 19 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Southwest Leadership Fund

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		60991.48
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	60991.48									
(c) Total Receipts (from Line 19) .....	2225.00	2225.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	63216.48	63216.48								
7. Total Disbursements (from Line 31) .....	15644.93	15644.93								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	47571.55	47571.55								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	3103.70									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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 3X (Rev. 06/2004)

Write or Type Committee Name  
Southwest Leadership Fund

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	1500.00	1500.00
(ii) Unitemized .....	725.00	725.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2225.00	2225.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	2225.00	2225.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	2225.00	2225.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2225.00	2225.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	13244.93	13244.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	13244.93	13244.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2400.00	2400.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	15644.93	15644.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15644.93	15644.93

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	2225.00	2225.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2225.00	2225.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	13244.93	13244.93
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	13244.93	13244.93

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 11
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)  
Southwest Leadership Fund

**A.**

Full Name (Last, First, Middle Initial)  
SAC & FOX TRIBE OF THE MISSISSIPPI IN IOWA

Mailing Address 349 MESKWAKI RD

City TAMA State IA Zip Code 52339

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 01 / 25 / 2010

Transaction ID: 11ai-000023613

Amount of Each Receipt this Period 1500.00

**B.**

Full Name (Last, First, Middle Initial)  
ACTBLUE

Mailing Address PO BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 725.00

Date of Receipt 01 / 31 / 2010

Transaction ID: 11ai-000023627

Amount of Each Receipt this Period 725.00

**[MEMO ITEM]  
ACT BLUE**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1500.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) NGP SOFTWARE, INC.</p> <p>Mailing Address 1225 EYE STREET NW, STE. 1225</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement SOFTWARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 21b-06-00006-00006</p> <p>Date of Disbursement MM / DD / YYYY 01 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 300.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) GEISE2 STRATEGIES, LLC</p> <p>Mailing Address 11208 ACADEMY RIDGE RD. NE</p> <p>City ALBUQUERQUE State NM Zip Code 87111</p> <p>Purpose of Disbursement CONSULTANT - COMPLIANCE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 21b-06-00007-00007</p> <p>Date of Disbursement MM / DD / YYYY 01 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 5878.13</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) JYP CONSULTING</p> <p>Mailing Address 303 MASSACHUSETTS AVE. NE 3RD FLOOR</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement CONSULTANT - FUNDRAISING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 21b-06-00009-00011</p> <p>Date of Disbursement MM / DD / YYYY 01 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p>

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

7678.13

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

A.	Full Name (Last, First, Middle Initial) JYP CONSULTING	Transaction ID: 21b-06-00009-00012 Date of Disbursement																			
	Mailing Address 303 MASSACHUSETTS AVE. NE 3RD FLOOR	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	1	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1	/	1	1	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CATERING	<table border="1"><tr><td>2899.37</td></tr></table>	2899.37																		
2899.37																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

B.	Full Name (Last, First, Middle Initial) MEREDITH DIXON	Transaction ID: 21b-06-00013-00018 Date of Disbursement																			
	Mailing Address 832 CALLE CORONADO SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	5	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1	/	1	5	/	2	0	1	0												
	City ALBUQUERQUE State NM Zip Code 87123	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAYROLL	<table border="1"><tr><td>827.90</td></tr></table>	827.90																		
827.90																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

C.	Full Name (Last, First, Middle Initial) MEREDITH DIXON	Transaction ID: 21b-06-00013-00022 Date of Disbursement																			
	Mailing Address 832 CALLE CORONADO SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	5	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1	/	1	5	/	2	0	1	0												
	City ALBUQUERQUE State NM Zip Code 87123	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAYROLL	<table border="1"><tr><td>1190.15</td></tr></table>	1190.15																		
1190.15																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>4917.42</td></tr></table>	4917.42
4917.42		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td>12595.55</td></tr></table>	12595.55
12595.55		

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

A.

Full Name (Last, First, Middle Initial)  
MARTHA COAKLEY FOR SENATE COMMITTEE

Transaction ID: 23-06-00012-00017

Date of Disbursement

Mailing Address 529 MAIN STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	1	0

City State Zip Code  
CHARLESTOWN MA 02129

Amount of Each Disbursement this Period

2400.00
---------

Purpose of Disbursement  
CONTRIBUTION

--

Category/  
Type

Candidate Name  
Martha Coakley

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: MA District:

Special

SUBTOTAL of Disbursements This Page (optional) ..... ►

2400.00
---------

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

2400.00
---------

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor JYP CONSULTING	Nature of Debt (Purpose): CONSULTANT - FUNDRAISING
Mailing Address 303 MASSACHUSETTS AVE. NE 3RD FLOOR	
City State ZIP Code WASHINGTON DC 20002	

Outstanding Balance Beginning This Period 1500.00	<b>Transaction ID: 10-000070</b>	
Amount Incurred This Period 0.00	Payment This Period 1500.00	Outstanding Balance at Close of This Period 0.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor JYP CONSULTING	Nature of Debt (Purpose): CATERING & SHIPPING
Mailing Address 303 MASSACHUSETTS AVE. NE 3RD FLOOR	
City State ZIP Code WASHINGTON DC 20002	

Outstanding Balance Beginning This Period 2927.42	<b>Transaction ID: 10-000071</b>	
Amount Incurred This Period 0.00	Payment This Period 2927.42	Outstanding Balance at Close of This Period 0.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor JYP CONSULTING	Nature of Debt (Purpose): CONSULTANT - FUNDRAISING
Mailing Address 303 MASSACHUSETTS AVE. NE 3RD FLOOR	
City State ZIP Code WASHINGTON DC 20002	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: 10-000072</b>	
Amount Incurred This Period 3000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>3000.00</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 / 11	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor JYP CONSULTING	Nature of Debt (Purpose): SHIPPING
Mailing Address 303 MASSACHUSETTS AVE. NE 3RD FLOOR	
City State ZIP Code WASHINGTON DC 20002	

Outstanding Balance Beginning This Period	<b>Transaction ID: 10-000073</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
103.70	0.00	103.70

1) <b>SUBTOTALS</b> This Period This Page (optional).....	103.70
2) <b>TOTALS</b> This Period (last page this line number only).....	3103.70
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	3103.70