

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED 2012 AUG -8 AM 9:48 Office Use Only. FEC MAIL CENTER

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
Arnold for Congress

ADDRESS (number and street) P.O. Box 511
Check if different than previously reported. (ACC) Okreechobee FL 34973-10511

2. FEC IDENTIFICATION NUMBER C00509885
3. IS THIS REPORT NEW (N) OR AMENDED (A) FL 16

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 Year-End Report (YE)
Termination Report (TER)

(b) 12-Day PRE-Election Report for the:
Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)
Election on 08/14/2012 in the State of FL

(c) 30-Day POST-Election Report for the:
General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 07/01/2012 through 07/25/2012

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 Roberta Sumner

Signature of Treasurer [Signature] Date 08/06/2012

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

12030872189

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Arnold for Congress

Report Covering the Period:

From:

07 01 2012

To:

07 23 2012

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))

1,883.92

9921.93

(b) Total Contribution Refunds
(from Line 20(d))

0.00

0.00

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

1,883.92

9921.93

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

5,482.36

13,185.26

(b) Total Offsets to Operating
Expenditures (from Line 14)

0.00

0.18

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))

5,482.36

13,185.08

8. Cash on Hand at Close of
Reporting Period (from Line 27)

736.85

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

0.00

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)

4,000.00

For further information contact:

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

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

12030872190

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Arnold for Congress

Report Covering the Period: From:

MM / DD / YYYY
07 / 01 / 2012

To:

MM / DD / YYYY
07 / 25 / 2012

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

(i) Itemized (use Schedule A).....

1,000.00

1,500.00

(ii) Unitemized.....

883.92

2,878.92

(iii) TOTAL of contributions from individuals ▶

1,883.92

4,378.92

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

5,543.01

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

1,883.92

9,921.93

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

4,000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

4,000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

0.18

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

1,883.92

13,922.11

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DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	5,482.36	13,185.26
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) ▶	5,482.36	13,185.26

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4,335.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1,883.92
25. SUBTOTAL (add Line 23 and Line 24).....	6,219.21
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5,482.36
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	736.85

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

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

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)
Arnold for Congress

A. Full Name (Last, First, Middle Initial)
Tindall, Sandra

Mailing Address
8400 NE 120th Street

City *Okreechobee* State *FL* Zip Code *34974*

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

Name of Employer *n/a* Occupation *Retired*

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1000000

Date of Receipt
07 09 2012

Amount of Each Receipt this Period
1000000

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

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

1000000

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 2	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Arnold for Congress

12030872194

Full Name (Last, First, Middle Initial) A. U.S. Postal Service		Date of Disbursement MM ' DD ' YYYY <i>07 ' 05 ' 2012</i>
Mailing Address <i>1000 SR 70 East</i>		Amount of Each Disbursement this Period <i>22500</i>
City <i>Okeechobee</i>	State <i>FL</i>	
Purpose of Disbursement <i>Postage stamps</i>	Candidate Name <i>Joe Arnold</i>	Category/Type <i>CC1</i>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <i>FL</i> District: <i>16</i>		

Full Name (Last, First, Middle Initial) B. U.S. Postal Service		Date of Disbursement MM ' DD ' YYYY <i>07 ' 06 ' 2012</i>
Mailing Address <i>1000 SR 70 East</i>		Amount of Each Disbursement this Period <i>180000</i>
City <i>Okeechobee</i>	State <i>FL</i>	
Purpose of Disbursement <i>Postage stamps</i>	Candidate Name <i>Joe Arnold</i>	Category/Type <i>CC1</i>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <i>FL</i> District: <i>16</i>		

Full Name (Last, First, Middle Initial) C. Staples		Date of Disbursement MM ' DD ' YYYY <i>07 ' 06 ' 2012</i>
Mailing Address <i>2609 S. Federal Hwy.</i>		Amount of Each Disbursement this Period <i>66,241</i>
City <i>Fort Pierce</i>	State <i>FL</i>	
Purpose of Disbursement <i>Office supplies</i>	Candidate Name <i>Joe Arnold</i>	Category/Type <i>CC1</i>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <i>FL</i> District: <i>16</i>		

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 2 OF 2	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)
Arnold for Congress

Full Name (Last, First, Middle Initial)

A. <i>U.S. Postal Service</i>		Date of Disbursement
Mailing Address <i>1000 SR 70 East</i>		<i>07/09/2012</i>
City <i>Okeechobee</i>	State <i>FL</i>	Zip Code <i>34972</i>
Purpose of Disbursement <i>Postage stamps</i>	Amount of Each Disbursement this Period <i>675.00</i>	
Candidate Name <i>Joe Arnold</i>	Category/Type <i>001</i>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <i>FL</i> District: <i>16</i>		

B. <i>U.S. Postal Service</i>		Date of Disbursement
Mailing Address <i>1000 SR 70 East</i>		<i>07/10/2012</i>
City <i>Okeechobee</i>	State <i>FL</i>	Zip Code <i>34972</i>
Purpose of Disbursement <i>Postage stamps</i>	Amount of Each Disbursement this Period <i>900.00</i>	
Candidate Name <i>Joe Arnold</i>	Category/Type <i>001</i>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <i>FL</i> District: <i>16</i>		

C. <i>U.S. Postal Service</i>		Date of Disbursement
Mailing Address <i>1000 SR 70 East</i>		<i>07/13/2012</i>
City <i>Okeechobee</i>	State <i>FL</i>	Zip Code <i>34972</i>
Purpose of Disbursement <i>Postage stamps</i>	Amount of Each Disbursement this Period <i>900.00</i>	
Candidate Name <i>Joe Arnold</i>	Category/Type <i>001</i>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <i>FL</i> District: <i>16</i>		

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	<i>5162.41</i>

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SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full)
Arnold for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)
Arnold, Joe

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address
P.O. Box 1494

City *Okeechobee* State *FL* ZIP Code *34973*

Original Amount of Loan *200000* Cumulative Payment To Date *NONE* Balance Outstanding at Close of This Period *200000*

TERMS
 Date Incurred *01/11/2012* Date Due *NONE* Interest Rate *NONE* % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
<i>NONE</i>	
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 Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶

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.

12030872196

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Arnold for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Arnold, Joe

Election:

Primary
 General
 Other (specify) ▼

Mailing Address

P.O. Box 1494

City

Okeechobee

State

FL

ZIP Code

34973

Original Amount of Loan

200000

Cumulative Payment To Date

NONE

Balance Outstanding at Close of This Period

200000

TERMS

Date Incurred

03 / 29 / 2012

Date Due

NONE

Interest Rate

NONE % (apr)

Secured:

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

NONE

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 Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

TOTALS This Period (last page in this line only)..... ▶

400000

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030872197

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

12030872198

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS First Class Mail	Postmarked
--	------------

<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
--	------------------

<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label	<input type="checkbox"/>

<input type="checkbox"/> USPS Express Mail	Postmarked
--	------------

<input type="checkbox"/> Postmark Illegible	
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<input type="checkbox"/> No Postmark	
--------------------------------------	--

<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>ups</i>	Shipping Date <i>8/7/12</i>
Next Business Day Delivery	<input checked="" type="checkbox"/>

<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
--	-----------------

<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
---	-----------------

<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
---	-----------------

<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
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<i>cmj</i> PREPARER	<i>8/8/12</i> DATE PREPARED
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