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FEC FORM 3	AND	_	RECEIPTS SEMENTS Committee			Office Use Only
1. NAME OF COMMITTEE (in		PRINT V	Example: If typir over the lines.	g, type	12FE4M5	
ADDRESS (number ar			ITE 112 			
Check if dif than previo reported. (A	usly <sub> </sub> NASH <sup>v</sup>	/ILLE				37209 
2. FEC IDENTIFIC	CATION NUMBER		Y		STATE	
C C0051954	16	3. IS T⊦ REPC	~	OR	AMENE (A)	STATE ▼ DISTRICT
(a) Quarterly R April 15 July 15 Octobe	PORT (Choose One) eports: 5 Quarterly Report (Q1 Quarterly Report (Q2) r 15 Quarterly Report 31 Year-End Report	(D) 12-Da	y <b>PRE</b> -Election Report Primary (12P Convention ( ion on	) 12C)	General (1 Special (1	
Termina	tion Report (TER)	Electi	General (300	i) D D /	Runoff (30	OR) Special (30S) in the State of
5. Covering Period	04 / D	D1 / Y Y Y 2016	Y through	м м 06	/ D D / 30	Y Y Y Y 2016
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 Thomas C. Arnold						
Signature of Treasure	or Thomas C. Arno	ld	[Electronically	Filed]	Date	/ D D / Y Y Y Y 14 2016
	false, erroneous, or ir	complete information	n may subject the per	rson signing t	this Report to t	he penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2/8

## Write or Type Committee Name LOU ANN FOR CONGRESS D D D 04 06 30 2016 01 2016 Report Covering the Period: From: To: COLUMN B COLUMN A This Period **Election Cycle-to-Date** 6. 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)) ..... 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

FEC Form 3 (Revised 12/2003)	DETAILED SUMMARY PAGE of Receipts	PAGE 3 / 8
Write or Type Committee Name		
LOU ANN FOR CONGRESS		
Report Covering the Period: From:	M         /         D         D         /         Y	M M / D D / Y Y Y Y 06 30 2016
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FR	OM:	
(a) Individuals/Persons Other Than		
Political Committees (i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL of contributions	• 0.00	0.00
from individuals		
<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
(such as PACs)	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans)		
(add Lines 11(a)(iii), (b), (c), and (d))	) 0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:	_	
(a) Made or Guaranteed by the Candidate	0.00	0.00
	, , , , , , , , , , , , , , , , , , , ,	0.00
(b) All Other Loans (c) TOTAL LOANS		
(add Lines 13(a) and (b))	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES		
(Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS	-	
(Dividends, Interest, etc.)	0.00	0.00
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	0.00

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Image# 201607149020457212

FEC Form 3 (Revised 02/2003)

## DETAILED SUMMARY PAGE

of Disbursements

PAGE 4/8

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	
<ul><li>19. LOAN REPAYMENTS:</li><li>(a) Of Loans Made or Guaranteed by the Candidate</li></ul>	0.00	, , , 0.00	
<ul> <li>(b) Of All Other Loans</li> <li>(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))</li> </ul>	0.00	0.00	
<ul> <li>REFUNDS OF CONTRIBUTIONS TO:</li> <li>(a) Individuals/Persons Other</li> <li>Than Political Committees</li> </ul>	0.00	0.00	
<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees (such as PACs)</li></ul>	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 SUMMARY

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

age# 201001140020401210			
CHEDULE C (FEC Form 3) DANS		Use separate schedule for each category of th Detailed Summary Pag	1e (check only one) X 13a
ME OF COMMITTEE (In Full) OU ANN FOR CONGRESS		Transac	tion ID : SC/10.4109
LOAN SOURCE Full Name (Last, First, Mi LOU ANN ZELENIK	ddle Initial) ' <b>PERSONAL FU</b>	NDS] Memo Item	Election: 2012 Primary General
Mailing Address 2620 SEQUOYA TRACE			Other (specify)
City	State ZIP Coc	le	
MURFREESBORO	TN 37127		
Original Amount of Loan	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Peric
15000.00		0.00	15000.00
TERMS Date Incurred	Date Due	Interest Rate	Secured:
M05 <sup>M</sup> / D31 <sup>D</sup> / Y 2012 Y	M M / D D / YO1,	/ǒ1/2Ŏ20 <sup>×</sup> 0.0	
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 4 4
UBTOTALS This Period This Page (optional). OTALS This Period (last page in this line onl		H	15000.00

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

-			
HEDULE C (FEC Form 3) ANS		Use separate schedule for each category of th Detailed Summary Pag	le (check only one) X 13a
ME OF COMMITTEE (In Full) OU ANN FOR CONGRESS		Transac	tion ID : SC/10.4111
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial) <b>'PERSONAL FU</b>	NDS] Memo Item	Election: 2012 Primary General
Mailing Address 2620 SEQUOYA TRACE			Other (specify)
City	State ZIP Coc	le	
MURFREESBORO	TN 37127		
Original Amount of Loan	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Perio
200000.00		0.00	200000.00
TERMS Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 29 / Y 2012 Y	M M / D D / Y01	/ǒ1/2Ŏ20 <sup>Ÿ</sup> 0.0	
List All Endorsers or Guarantors (if any) t	o Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y 1 1 y 1 1 1 1
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 9 1
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	g
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 9 1
<b>JBTOTALS</b> This Period This Page (optional). <b>DTALS</b> This Period (last page in this line only		H	200000.00

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

5			PAGE 7 OF 8
CHEDULE C (FEC Form 3) OANS		Use separate schedule( for each category of the Detailed Summary Page	s) FOR LINE NUMBER: e (check only one) X 13a
IAME OF COMMITTEE (In Full) LOU ANN FOR CONGRESS		Transact	ion ID : SC/10.4112
LOAN SOURCE Full Name (Last, First, Mi LOU ANN ZELENIK	iddle Initial) ' <b>PERSONAL FU</b>	INDS] Memo Item	Election: 2012 Primary General
Mailing Address 2620 SEQUOYA TRACE			Other (specify)
City MURFREESBORO	State ZIP Coo TN 37127	de	
Original Amount of Loan	Cumulative Payment To	Date Balar	nce Outstanding at Close of This Period
8000.00		0.00	8000.00
TERMS Date Incurred	Date Due	Interest Rate	Secured:
	M M / D D / Y12	/31/2022 0.00	% (apr) Yes No
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y
SUBTOTALS This Period This Page (optional)			8000.00

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

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CHEDULE C (FEC Form 3) OANS		Use separate schedule( for each category of th Detailed Summary Page	e (check only one) X 13a
IAME OF COMMITTEE (In Full) LOU ANN FOR CONGRESS		Transact	ion ID : SC/10.4113
LOAN SOURCE Full Name (Last, First, Mi	iddle Initial) <b>'PERSONAL FU</b>	NDS] Memo Item	Election: 2012 Primary General
Mailing Address 2620 SEQUOYA TRACE			Other (specify)
City MURFREESBORO	State ZIP Coc TN 37127	le	
Original Amount of Loan 5000.00	Cumulative Payment To	Date Balar 0.00	nce Outstanding at Close of This Perio 5000.00
TERMS	7 7		<u>z</u> <u>z</u>
Date Incurred	Date Due	Interest Rate 0.0	
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (optional)		······	5000.00
<b>FOTALS</b> This Period (last page in this line on	ly)	····· L	228000.00