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FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	_	Ithorized Com	_	Offic	ce Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT	•	ample: If typing, typer the lines.	e 12FE4M5	
LOU ANN FOR CONG					1
ADDRESS (number and street)	6213 CHARLOT	TE AVE SUITE 11:			
▼ Check if different					
than previously reported. (ACC)				TN372	09
2. FEC IDENTIFICATION N	IIMDED W	CITY ▲		STATE A	ZIP CODE ▲
2. FEC IDENTIFICATION N	UIVIDEN ¥	-			STATE ▼ DISTRICT
C C00519546		3. IS THIS REPORT	NEW (N) OF	AMENDED (A)	TN 06
4. TYPE OF REPORT (Ch	oose One)	(b) 12-Day PRE	-Election Report for	the:	
(a) Quarterly Reports:		(=, 12 Buy 1112			D off (4.0D)
April 15 Quarterly F	Report (Q1)	H	Primary (12P)	General (12G)	Runoff (12R)
July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3)		Convention (12C)		Special (12S)	
		Election on	M M / D	D / Y Y Y Y	in the State of
January 31 Year-En	(c) 30-Day POST -Election Report for the:				
			General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)		Election on	M M / D	D / Y " Y " Y " Y	in the State of
5. Covering Period 0.	M / D D /	^Y ^Y ^Y ^Y ^Y ^Y 2019	through	M M / D D / Y	y y y 2019
I certify that I have examined th			nowledge and belief	it is true, correct and co	mplete.
Type or Print Name of Treasure	Arnold Jr., Tho r	a5, ∪, ,			
Arno Signature of Treasurer	old Jr., Thomas, C, ,		[Electronically Filed]	Date 07	15 / Y Y Y Y Y Y Y 2019
NOTE: Submission of false, errone	eous, or incomplete	e information may	subject the person sig	gning 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

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
LOU ANN FOR CONGRESS

Schedule C and/or Schedule D).....

2019 2019 06 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 117791.03 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 2500.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 115291.03 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 344850.36 (from Line 17) (b) Total Offsets to Operating 1687.65 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 343162.71 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 128.32 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

For further information contact:

228000.00

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

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

DETAILED SUMMARY PAGE

of Receipts

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FEC Form 3 (Revised 05/2016) Write or Type Committee Name

LOU ANN FOR CONGRESS

04 2019 06 30 2019 Report Covering the Period: From: To:

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
1. CONTRIBUTIONS (other than loan	ns) FROM:		
(a) Individuals/Persons Other Th Political Committees	an		
(i) Itemized (use Schedule A)	90869.30	
(ii) Unitemized		26921.73	
(iii) TOTAL of contributions from individuals		117791.03	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) The Candidate(e) TOTAL CONTRIBUTIONS	0.00	0.00	
(other than loans) (add Lines 11(a)(iii), (b), (c), a	nd (d)) 0.00	117791.03	
2. TRANSFERS FROM OTHER	0.00	0.00	
AUTHORIZED COMMITTEES		0.00	
3. LOANS:(a) Made or Guaranteed by the			
Candidate	0.00	228000.00	
(b) All Other Loans		0.00	
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	228000.00	
4. OFFSETS TO OPERATING			
EXPENDITURES (Refunds, Rebates, etc.)	0.00	1687.65	
5. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00	
6. TOTAL RECEIPTS (add Lines			
11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	347478.68	

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3 (Revised 05/2016)

COLUMN A COLUMN B II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 0.00 344850.36 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other 0.00 1000.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees 0.00 1500.00 (such as PACs) TOTAL CONTRIBUTION REFUNDS 0.00 2500.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 0.00 347350.36 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 128.32 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 0.00 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 128.32 25. SUBTOTAL (add Line 23 and Line 24)..... 0.00 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 128.32 (subtract Line 26 from Line 25).....

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

PAGE 5 OF FOR LINE NUMBER: (check only one)

X 13a 13b

8

NAME OF COMMITTEE (In Full) LOU ANN FOR CONGRESS		Transaction ID : SC/10.4130				
LOAN SOURCE Full Name (Last, Firs	•	Memo Item Election: 2012 X Primary General				
Mailing Address 6213 CHARLOTTE AVE SUITE 112		Other (specify) ▼				
City	State	ZIP Code 37209 Personal Funds of the Candidate				
Original Amount of Loan	Cumulative Pay	rment To Date Balance Outstanding at Close of This Period				
15000.00		0.00 15000.00				
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)				
M05 ^M / D31 ^D / Y Ž01Ž Y	M M / D D	¹ √01/ŏ1/2ŏ20 ¹ 0.00 % (apr) Yes X No				
List All Endorsers or Guarantors (if a	any) to Loan Source					
1. Full Name (Last, First, Middle Initia	l)	Name of Employer				
Mailing Address		Occupation				
City	ate ZIP Code	Amount Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial))	Name of Employer				
Mailing Address		Occupation				
		Amount				
City	ate ZIP Code	Guaranteed Outstanding:				
3. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City	ate ZIP Code	Amount Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City	ate ZIP Code	Amount Guaranteed Outstanding:				
SUBTOTALS This Period This Page (option	, onal)	4500000				
TOTALS This Period (last page in this line only)						
		y y				
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

PAGE OF FOR LINE NUMBER:

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X 13a (check only one) Detailed Summary Page 13b Transaction ID: SC/10.4131 NAME OF COMMITTEE (In Full) LOU ANN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary LOU ANN FOR CONGRESS General Mailing Address 6213 CHARLOTTE AVE SUITE 112 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate TN 37209 NASHVILLE Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 200000.00 0.00 200000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D29^D M 06M Ž01Ž Y01/01/2020 Y 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)..... 200000.00 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 OF FOR LINE NUMBER: (check only one)

X 13a 13b

8

Transaction ID: SC/10.4132 NAME OF COMMITTEE (In Full) LOU ANN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary LOU ANN FOR CONGRESS General Mailing Address 6213 CHARLOTTE AVE SUITE 112 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate TN 37209 NASHVILLE Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 8000.00 0.00 8000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D ^M80^M Ž01Ž Y01/01/2020 Y 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)..... 8000.00 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 OF FOR LINE NUMBER: **X** 13a (check only one)

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13b Transaction ID: SC/10.4133 NAME OF COMMITTEE (In Full) LOU ANN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary LOU ANN FOR CONGRESS General Mailing Address 6213 CHARLOTTE AVE SUITE 112 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate TN 37209 NASHVILLE Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D21 ^D ^M80^M Ž01Ž Y01/01/2020 Y 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)..... 5000.00 TOTALS This Period (last page in this line only) 228000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.