

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 380 S. Melrose Dr., #270  
Vista CA 92081  
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** ▼ C C00581595 CITY ▲ STATE ▲ ZIP CODE ▲  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A) STATE ▼ DISTRICT  
CA 49

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

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2016 through M M / D D / Y Y Y Y 03 / 31 / 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 Douglas Applegate

Signature of Treasurer Douglas Applegate [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 15 / 2016

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Applegate for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	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))....	10645.00	49789.96
(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)).....	10645.00	49789.96
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	11547.26	39155.98
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	11547.26	39155.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	10292.07	
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).....	11883.59	

**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 12/2003)

Write or Type Committee Name

**Applegate for Congress**

Report Covering the Period: From:  /  /  To:  /  /

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).....	8680.00	40930.00
(ii) Unitemized .....	1965.00	8859.96
(iii) TOTAL of contributions from individuals .....	10645.00	49789.96
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (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))..	10645.00	49789.96
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	5.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	5.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....		
	0.33	3.09
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....		
	10645.33	49798.05

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	11547.26	39155.98
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 .....	350.00	350.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	11897.26	39505.98

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	11544.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10645.33
25. SUBTOTAL (add Line 23 and Line 24).....	22189.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	11897.26
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10292.07

**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 5 OF 12
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Applegate for Congress**

**A. Dean Daggett**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26020 Acero #100  
 City Mission Viejo State CA Zip Code 92691  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Attorney  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 19 / 2016  
**Transaction ID : INCA17**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Greg Jacobson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2303 RR 620 S., #135-524  
 City Lakeway State TX Zip Code 78734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Unemployed Occupation Banker  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2016  
**Transaction ID : INCA30**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**C. Vincent J. La Barbera**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4100 Newport Place Dr., #620  
 City Newport Beach State CA Zip Code 92660  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Attorney  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2016  
**Transaction ID : INCA21**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....  
**TOTAL** This Period (last page this line number only).....

5700.00

**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 6 OF 12
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Applegate for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Vincent J. La Barbera**

Mailing Address 4100 Newport Place Dr., #620

City State Zip Code  
Newport Beach CA 92660

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 24 / 2016

**Transaction ID : INCA20**

Amount of Each Receipt this Period  
2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Robert V. McDonald**

Mailing Address 6255 E. Camino Manzano

City State Zip Code  
Anaheim CA 92807

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

Name of Employer Occupation  
Black Chamber of Orange County Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
280.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

**Transaction ID : INCA24**

Amount of Each Receipt this Period  
280.00

Memo Item

**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  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

2980.00

8680.00

**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 7 OF 12	
	<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)  
**Applegate for Congress**

Full Name (Last, First, Middle Initial) <b>A. Evans &amp; Katz LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2016
Mailing Address P.O. Box 75357		Amount of Each Disbursement this Period 2531.85
City Washington	State DC	
Zip Code 20013	Purpose of Disbursement Treasurer Services	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : EXPB16</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Melrose Law Center</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 380 S. Melrose Dr.		Amount of Each Disbursement this Period 1897.13
City Vista	State CA	
Zip Code 92081	Purpose of Disbursement Rent	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : EXPB15</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NGP VAN, Inc.</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 1101 15th St., NW #500		Amount of Each Disbursement this Period 900.00
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Website/Software Services	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	<b>Transaction ID : EXPB37</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5328.98
<b>TOTAL</b> 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 8 OF 12	
	<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)  
**Applegate for Congress**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2016	
Mailing Address 1101 15th St., NW #500			Amount of Each Disbursement this Period 4000.00	
City Washington	State DC	Zip Code 20005	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Website/Software Services		Category/ Type 001	Transaction ID : EXPB38	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. NGP VAN, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016	
Mailing Address 1101 15th St., NW #500			Amount of Each Disbursement this Period 1100.00	
City Washington	State DC	Zip Code 20005	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Website/Software Services		Category/ Type 001	Transaction ID : EXPB42	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. NGP VAN, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2016	
Mailing Address 1101 15th St., NW #500			Amount of Each Disbursement this Period 1100.00	
City Washington	State DC	Zip Code 20005	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Website/Software Services		Category/ Type 001	Transaction ID : EXPB45	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6200.00
<b>TOTAL</b> This Period (last page this line number only).....	11528.98

**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 9 OF 12
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Applegate for Congress**

Full Name (Last, First, Middle Initial) <b>A. California Democratic Party</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016
Mailing Address 1830 9th St.		Amount of Each Disbursement this Period 350.00 <input type="checkbox"/> Memo Item
City Sacramento State CA Zip Code 95811	Purpose of Disbursement Contribution to non-federal PAC Category/Type 011	
Candidate Name California Democratic Party	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : EXPB39
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period  <input type="checkbox"/> Memo Item
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period  <input type="checkbox"/> Memo Item
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	350.00

**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)  
Applegate for Congress

Transaction ID : PAYC4

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

Douglas A. Applegate

Memo Item

Election: 2016

Primary

General

Other (specify) ▼

Mailing Address

380 S. Melrose Dr., #207

City

State

ZIP Code

Vista

CA

92081

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5.00

0.00

5.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

07 / 14 / 2015

12/31/2017

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:

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)..... ▶

5.00

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

5.00

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

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

NAME OF COMMITTEE (In Full)

**Applegate for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Douglas A. Applegate</b>		Nature of Debt (Purpose): Reimbursement-Fundraising Consulting Services
Mailing Address 380 S. Melrose Dr., #207		
City State	Zip Code	
Vista CA	92081	

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD8</b>	
5000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Douglas A. Applegate</b>		Nature of Debt (Purpose): Treasurer Services
Mailing Address 380 S. Melrose Dr., #207		
City State	Zip Code	
Vista CA	92081	

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD14</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
2539.00	0.00	2539.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Douglas A. Applegate</b>		Nature of Debt (Purpose): Office Rent
Mailing Address 380 S. Melrose Dr., #207		
City State	Zip Code	
Vista CA	92081	

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD49</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1807.74	0.00	1807.74

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	9346.74
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 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Applegate for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Evans &amp; Katz LLC</b>		Nature of Debt (Purpose): Treasurer Services
Mailing Address P.O. Box 75357		
City State	Zip Code	
Washington	DC 20013	

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD34</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
2531.85	0.00	2531.85

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	2531.85
2) <b>TOTALS</b> This Period (last page this line number only) .....	11878.59
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	5.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	11883.59