

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

SEGAL FOR SENATE

ADDRESS (number and street)

PO BOX 11497

Check if different than previously reported. (ACC)

TAKOMA PARK

MD

20913

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C C00658765

3. IS THIS REPORT NEW OR AMENDED

STATE DISTRICT

MD

00

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 MM/DD/YYYY in the State of

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period

MM/DD/YYYY 07/01/2018

through

MM/DD/YYYY 09/30/2018

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 SEGAL, JEROME, , ,

Signature of Treasurer SEGAL, JEROME, , ,

[Electronically Filed]

Date

MM/DD/YYYY 10/15/2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Table with 7 columns and 1 row for Office Use Only.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
SEGAL FOR SENATE

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))....	865.00	277499.24
(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)).....	865.00	277499.24
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	137086.18	1292197.44
(b) Total Offsets to Operating Expenditures (from Line 14).....	9904.00	9904.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	127182.18	1282293.44
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3205.80	
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).....	1008000.00	

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 05/2016)

Write or Type Committee Name

SEGAL FOR SENATE

Report Covering the Period: From: M M / D D / Y Y Y Y
07 / 01 / 2018 To: M M / D D / Y Y Y Y
09 / 30 / 2018

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).....	0.00	5450.00
(ii) Unitemized.....	865.00	8859.31
(iii) TOTAL of contributions from individuals ▶	865.00	14309.31
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	263189.93
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	865.00	277499.24
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	108000.00	1408000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	108000.00	1408000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	9904.00	9904.00
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)..... ▶	118769.00	1695403.24

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	137086.18	1292197.44
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	400000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	400000.00
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) ►	137086.18	1692197.44

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	21522.98
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	118769.00
25. SUBTOTAL (add Line 23 and Line 24).....	140291.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	137086.18
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3205.80

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SEGAL FOR SENATE

A. Full Name (Last, First, Middle Initial)
SEGAL, JEROME, , ,

Mailing Address PO BOX 11497

City: TAKOMA PARK State: MD Zip Code: 20913

FEC ID number of contributing federal political committee: **C S8MD00252**

Name of Employer: Segal for Senate Occupation: Candidate

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1663189.93

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 03 / 2018

Transaction ID : SA13A.4781

Amount of Each Receipt this Period
100000.00

Memo Item

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

Mailing Address PO BOX 11497

City: TAKOMA PARK State: MD Zip Code: 20913

FEC ID number of contributing federal political committee: **C S8MD00252**

Name of Employer: Segal for Senate Occupation: Candidate

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1671189.93

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 25 / 2018

Transaction ID : SA13A.4826

Amount of Each Receipt this Period
8000.00

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).....▶	108000.00
TOTAL This Period (last page this line number only).....▶	108000.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA13A

Transaction ID : SA13A.4781

(Current loan amount of 100000.00 from a balance of 100000.00 has been forgiven)

Form/Schedule: SA13A

Transaction ID: SA13A.4826

(Current loan amount of 8000.00 from a balance of 8000.00 has been forgiven)

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 7 OF 26	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SEGAL FOR SENATE

A. Full Name (Last, First, Middle Initial)
The Washington Post

Mailing Address 1301 K St. NW

City Washington	State DC	Zip Code 20071
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
9904.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 25 / 2018

Transaction ID : SA14.4842

Amount of Each Receipt this Period

9904.00

Memo Item
Refund for Print Advertising Expenditure

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

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

Amount of Each Receipt this Period

--

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)..... ▶	9904.00
TOTAL This Period (last page this line number only)..... ▶	9904.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA14

Transaction ID : SA14.4842

Refund

Form/Schedule:

Transaction ID:

**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 26			
	<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)
SEGAL FOR SENATE

Full Name (Last, First, Middle Initial) A. ActionSprout			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2018		
Mailing Address 1317 Commercial St. #201			FEC Identification Number C		
City Bellingham	State WA	Zip Code 98225	Amount of Each Disbursement this Period 99.00		
Purpose of Disbursement Digital Advertising		Category/ Type	Transaction ID : SB17.4789		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. ActionSprout			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2018		
Mailing Address 1317 Commercial St. #201			FEC Identification Number C		
City Bellingham	State WA	Zip Code 98225	Amount of Each Disbursement this Period 99.00		
Purpose of Disbursement Digital Advertising		Category/ Type	Transaction ID : SB17.4804		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. ActionSprout			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2018		
Mailing Address 1317 Commercial St. #201			FEC Identification Number C		
City Bellingham	State WA	Zip Code 98225	Amount of Each Disbursement this Period 99.00		
Purpose of Disbursement Digital Advertising		Category/ Type	Transaction ID : SB17.4818		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	297.00
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 10 OF 26	
	<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)
SEGAL FOR SENATE

Full Name (Last, First, Middle Initial) A. Amazon			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2018	
Mailing Address PO Box 81226			FEC Identification Number C	
City Seattle	State WA	Zip Code 98108	Amount of Each Disbursement this Period 143.17	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : SB17.4784	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Amazon			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2018	
Mailing Address PO Box 81226			FEC Identification Number C	
City Seattle	State WA	Zip Code 98108	Amount of Each Disbursement this Period 46.40	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : SB17.4785	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Amazon			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2018	
Mailing Address PO Box 81226			FEC Identification Number C	
City Seattle	State WA	Zip Code 98108	Amount of Each Disbursement this Period 22.00	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : SB17.4786	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	211.57
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 11 OF 26	
	<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)
SEGAL FOR SENATE

Full Name (Last, First, Middle Initial) A. Apus Media, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2018
Mailing Address 42935 Nokes Corner Terrace		FEC Identification Number C
City Ashburn	State VA	Zip Code 20148
Purpose of Disbursement Advertising - Design	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 10400.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4795
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Audience Partners		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2018
Mailing Address 1600 K St. NW Suite 803		FEC Identification Number C
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Digital Advertising	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 26619.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4801
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Avison Young		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2018
Mailing Address 2099 Pennsylvania Ave. NW Suite 500		FEC Identification Number C
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Office Rent	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 2325.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4794
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	39344.50
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 12 OF 26	
	<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)
SEGAL FOR SENATE

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2018
Mailing Address 6950 Carroll Ave.		FEC Identification Number C
City Takoma Park	State MD	Zip Code 20912
Purpose of Disbursement Bank Fees	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 127.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4836
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Garvey Schubert Barer		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2018
Mailing Address 1000 Potomac Street		FEC Identification Number C
City Washington	State DC	Zip Code 20007
Purpose of Disbursement Legal Services	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 3383.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4793
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Garvey Schubert Barer		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2018
Mailing Address 1000 Potomac Street		FEC Identification Number C
City Washington	State DC	Zip Code 20007
Purpose of Disbursement Legal Services	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 12819.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4810
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	16330.50
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 13 OF 26	
	<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)
SEGAL FOR SENATE

Full Name (Last, First, Middle Initial) A. Garvey Schubert Barer			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2018	
Mailing Address 1000 Potomac Street			FEC Identification Number C	
City Washington	State DC	Zip Code 20007	Amount of Each Disbursement this Period 4477.00	
Purpose of Disbursement Legal Services		Category/ Type	Transaction ID : SB17.4809	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Grey, Stephen, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2018	
Mailing Address 4658 Don Lorenzo Drive Suite E			FEC Identification Number C	
City Los Angeles	State CA	Zip Code 90008	Amount of Each Disbursement this Period 10500.00	
Purpose of Disbursement Social Media Services		Category/ Type	Transaction ID : SB17.4792	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Grey, Stephen, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2018	
Mailing Address 4658 Don Lorenzo Drive Suite E			FEC Identification Number C	
City Los Angeles	State CA	Zip Code 90008	Amount of Each Disbursement this Period 5270.00	
Purpose of Disbursement Social Media Services		Category/ Type	Transaction ID : SB17.4811	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	20247.00
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 14 OF 26	
	<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)
SEGAL FOR SENATE

Full Name (Last, First, Middle Initial) A. KCF			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2018	
Mailing Address 2099 Pennsylvania Ave. Suite 500			FEC Identification Number C	
City Washington	State DC	Zip Code 20006	Amount of Each Disbursement this Period 150.00	
Purpose of Disbursement Internet Services		Category/ Type	Transaction ID : SB17.4821	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Nationbuilder			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2018	
Mailing Address 520 S. Grand Ave			FEC Identification Number C	
City Los Angeles	State CA	Zip Code 90071	Amount of Each Disbursement this Period 226.00	
Purpose of Disbursement Website Services		Category/ Type	Transaction ID : SB17.4790	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Nationbuilder			Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2018	
Mailing Address 520 S. Grand Ave			FEC Identification Number C	
City Los Angeles	State CA	Zip Code 90071	Amount of Each Disbursement this Period 226.00	
Purpose of Disbursement Website Services		Category/ Type	Transaction ID : SB17.4805	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	602.00
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 15 OF 26			
	<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)
SEGAL FOR SENATE

Full Name (Last, First, Middle Initial) A. Nationbuilder			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2018		
Mailing Address 520 S. Grand Ave			FEC Identification Number C		
City Los Angeles	State CA	Zip Code 90071	Amount of Each Disbursement this Period 226.00		
Purpose of Disbursement Website Services		Category/ Type	Transaction ID : SB17.4820		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. NRI Staffing			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2018		
Mailing Address 1900 L St. NW Suite 725			FEC Identification Number C		
City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period 6509.71		
Purpose of Disbursement Staffing		Category/ Type	Transaction ID : SB17.4796		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. NRI Staffing			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2018		
Mailing Address 1900 L St. NW Suite 725			FEC Identification Number C		
City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period 2008.00		
Purpose of Disbursement Staffing		Category/ Type	Transaction ID : SB17.4797		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	8743.71
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 16 OF 26	
	<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)
SEGAL FOR SENATE

Full Name (Last, First, Middle Initial) A. NRI Staffing		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2018
Mailing Address 1900 L St. NW Suite 725		FEC Identification Number C
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Staffing		Amount of Each Disbursement this Period 2563.53
Candidate Name		Transaction ID : SB17.4798
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. NRI Staffing		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2018
Mailing Address 1900 L St. NW Suite 725		FEC Identification Number C
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Staffing		Amount of Each Disbursement this Period 500.00
Candidate Name		Transaction ID : SB17.4812
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. NRI Staffing		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2018
Mailing Address 1900 L St. NW Suite 725		FEC Identification Number C
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Staffing		Amount of Each Disbursement this Period 14092.32
Candidate Name		Transaction ID : SB17.4815
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	17155.85
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 17 OF 26			
	<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)
SEGAL FOR SENATE

Full Name (Last, First, Middle Initial) A. NRI Staffing			Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2018		
Mailing Address 1900 L St. NW Suite 725			FEC Identification Number C		
City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period 15940.07		
Purpose of Disbursement Staffing		Category/ Type	Transaction ID : SB17.4823		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. On the Marc Media			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2018		
Mailing Address 9211 Corporate Boulevard Suite 360			FEC Identification Number C		
City Rockville	State MD	Zip Code 20850	Amount of Each Disbursement this Period 16602.00		
Purpose of Disbursement Media Consulting		Category/ Type	Transaction ID : SB17.4814		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Segal, Max, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2018		
Mailing Address 7910 Takoma Ave			FEC Identification Number C		
City Silver Spring	State MD	Zip Code 20910	Amount of Each Disbursement this Period 780.00		
Purpose of Disbursement General Campaign Consulting		Category/ Type	Transaction ID : SB17.4813		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	33322.07
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 18 OF 26	
	<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)
SEGAL FOR SENATE

Full Name (Last, First, Middle Initial) A. Segal, Max, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2018	
Mailing Address 7910 Takoma Ave			FEC Identification Number C	
City Silver Spring	State MD	Zip Code 20910	Amount of Each Disbursement this Period 780.00	
Purpose of Disbursement General Campaign Consulting		Category/ Type	Transaction ID : SB17.4822	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item	
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) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item	
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:				

SUBTOTAL of Disbursements This Page (optional).....▶	780.00
TOTAL This Period (last page this line number only).....▶	137034.20

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4413**
SEGAL FOR SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial) SEGAL, JEROME, , ,		<input type="checkbox"/> Memo Item	Election: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 11497			
City TAKOMA PARK	State MD	ZIP Code 20913	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 500000.00	Cumulative Payment To Date 400000.00	Balance Outstanding at Close of This Period 100000.00
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TERMS	Date Incurred M 04 / D 02 / Y 2018	Date Due M M / D D / Y 12/31/2018	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....▶	100000.00
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.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : SC/10.4413

(Current loan amount of 100000.00 from a balance of 100000.00 has been forgiven)

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **SEGal FOR SENATE** Transaction ID : **SC/10.4414**

LOAN SOURCE Full Name (Last, First, Middle Initial) SEGal, JEROME, , ,		<input type="checkbox"/> Memo Item	Election: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 11497			
City TAKOMA PARK	State MD	ZIP Code 20913	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 800000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 800000.00
--------------------------------------	------------------------------------	--

TERMS	Date Incurred M 04 / D 09 / Y 2018	Date Due M M / D D / Y 12/31/2018	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....▶	800000.00
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.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : SC/10.4414

(Current loan amount of 800000.00 from a balance of 800000.00 has been forgiven)

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4781**
SEGAL FOR SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial) SEGAL, JEROME, , ,		<input type="checkbox"/> Memo Item	Election: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 11497			
City TAKOMA PARK	State MD	ZIP Code 20913	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
--------------------------------------	------------------------------------	--

TERMS	Date Incurred M 07 / D 03 / Y 2018	Date Due M M / D D / Y 12/31/2018	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....▶	100000.00
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.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : SC/10.4781

(Current loan amount of 100000.00 from a balance of 100000.00 has been forgiven)

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4826**
SEGAL FOR SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial) SEGAL, JEROME, , ,		<input type="checkbox"/> Memo Item	Election: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 11497			
City TAKOMA PARK	State MD	ZIP Code 20913	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 8000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 8000.00
------------------------------------	------------------------------------	--

TERMS	Date Incurred M 09 / D 25 / Y 2018	Date Due M M / D D / Y 12/31/2018	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....▶	8000.00
TOTALS This Period (last page in this line only).....▶	1008000.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : SC/10.4826

(Current loan amount of 8000.00 from a balance of 8000.00 has been forgiven)

Form/Schedule:

Transaction ID: