PAGE 1 / 14

Image# 15950835532

FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	Office Use Only					
NAME OF COMMITTEE (in full)	TYPE OR PRINT	•	xample: If typin	g, type	12FE4M5		
STOCKER IN CO	NGRESS	1 1 1 1 1	1 1 1 1		1 1 1 1		
ADDRESS (number and st	reet)						
Check if differe than previously reported. (ACC)	SILVA				MO 63	3964	
2. <b>FEC IDENTIFICAT</b>	ION NUMBER ▼	CITY ▲			STATE A	ZIP CODE	
C C00549287		3. IS THIS REPORT	NEW (N)	OR	× AMENDE (A)	STATE ▼ DISTRICT  MO 08  □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	
	rts: arterly Report (Q1)	(b) 12-Day <b>PR</b>	<b>E</b> -Election Report Primary (12P)  Convention (		General (12		
	arterly Report (Q2)  Quarterly Report (Q3)	Election or	n /	D 0 /	YYYY	in the State of	
X January 31	Year-End Report (YE)	(c) 30-Day <b>PO</b>	ST-Election Rep	port for the:			
Termination	Report (TER)	Election or	General (30G	D D /	Runoff (30F	in the State of	
5. Covering Period	M M M / D D /	2013	through	M M 12	/ 31 /	Y " Y " Y " Y " Y " Z013 _	
I certify that I have exam Type or Print Name of Ti		-	knowledge and l	belief it is tro	ue, correct and	complete.	
Signature of Treasurer	Mr. Chuck Banks		[Electronically I	Filed] D	Date 03	/ 03 / Y Y Y Y Y Y 2015	
	e, erroneous, or incomple	ete information may	y subject the per	son signing t	this Report to the	e penalties of 2 U.S.C. §437g.	
Office Use Only						FEC FORM 3 (Revised 02/2003)	

### **SUMMARY PAGE**

of Receipts and Disbursements

PAGE 2 / 14

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

STOCKER IN CONGRESS

2013 10 12 31 01 2013 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 7435.00 12705.00 (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) 7435.00 12705.00 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 16675.61 28016.54 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 16675.61 28016.54 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 6838.46 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 22150.00 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

### **DETAILED SUMMARY PAGE**

of Receipts

2013

12

31

FEC Form 3 (Revised 12/2003)

PAGE 3 / 14

2013

0.00

Write or Type Committee Name

#### STOCKER IN CONGRESS

Report Covering the Period: To: From: **COLUMN B COLUMN A** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 6700.00 11900.00 (i) Itemized (use Schedule A)...... 735.00 805.00 (ii) Unitemized ..... (iii) TOTAL of contributions 7435.00 12705.00 from individuals ..... 0.00 0.00 (b) Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 (d) The Candidate ..... TOTAL CONTRIBUTIONS (other than loans) 7435.00 12705.00 (add Lines 11(a)(iii), (b), (c), and (d))...

12. TRANSFERS FROM OT	ппп
AUTHORIZED COMMIT	TEES .

13. LOANS:

(a)	Made or Guaranteed by the Candidate	12000.00
(b)	All Other Loans	0.00
(c)	TOTAL LOANS (add Lines 13(a) and (b))	12000.00

10

01

22150.00		7			7			12000.00		7			7		
0.00	Ξ	7	Ξ	Ξ	7	Ξ		0.00	Ξ	7	Ι	Ι	,	Ι	
22150.00	Ξ	7	Ι	Ξ	7		Ξ	12000.00	Ι	7	Ι	Ι	7	Ι	

0.00

14.	OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)
4 -	OTLIED DECEIDTO

15.	OTHER RECEIPTS (Dividends, Interest, etc.)
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4).....

		7			7			0.00	
								0.00	П
_	-	7	-	-	ij	-	-	0.00	_
						T	194	35.00	П.
	-	7	-	-	7	-		W	

L			- 10			- (9)			0.00	
П										
Г			7						0.00	
Н	-	-	7	-	-	7	-	-	0.00	-
Г								348	55.00	
			7			7				-

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

ursements

PAGE 4 / 14

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	16675.61	28016.54
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)	16675.61	28016.54
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	4079.07
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	19435.00
25.	SUBTOTAL (add Line 23 and Line 24)		23514.07
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	16675.61
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)		6838.46

## SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 5 OF 14 Use separate schedule(s) (check only one) for each category of the 11a 11b 11d 11c Detailed Summary Page 12

ITEMIZED RECEIPTS 13a 13b 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) STOCKER IN CONGRESS Full Name (Last, First, Middle Initial) Ms Michelle Aycock Date of Receipt Mailing Address 407 S East St 2013 23 City State Zip Code Transaction ID: SA11AI.4157 MO 63870 Parma FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation self small business owner Receipt For: 2014 Election Cycle-to-Date Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Ms Rea Beck Kleeman Date of Receipt Mailing Address 520 S Brentwood Blvd. Apt 1A 10 10 2013 City State Zip Code Transaction ID: SA11AI.4139 Clayton MO 63105-2253 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation retired None Receipt For: 2014 Election Cycle-to-Date | Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Ms Joyce Trimble Date of Receipt Mailing Address 11830 State Route BB 2013 12 16 City Zip Code State Transaction ID: SA11AI.4167 MO Rolla 65401 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2600.00 Name of Employer Occupation retired none Receipt For: 2014 Election Cycle-to-Date | Yrimary General Other (specify) 2600.00

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

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

4100.00

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR	FOR LINE NUMBER: [					:	ь	OF		14		
(che	(check only one)											
X	11a		11b		11c		11	d		_		
	12		13a		13b		14	ļ		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.

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.						
$\rangle$	NAME OF COMMITTEE (In Full) STOCKER IN CONGRESS								
۹.	Full Name (Last, First, Middle Initial) Mr. Selden Trimble  Mailing Address 11830 State Route BB		Date of Receipt  12 16 2013						
	City Rolla	State Zip Code MO 65401	Transaction ID : SA11AI.4165						
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period						
	Name of Employer none	Occupation retired	2000.00						
	Receipt For: 2014  Primary General Other (specify)	Election Cycle-to-Date 2600.00							
3.	Full Name (Last, First, Middle Initial)  Mailing Address	Date of Receipt							
	City	State Zip Code							
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period						
	Name of Employer	Occupation							
	Receipt For:  Primary General Other (specify)	Election Cycle-to-Date							
_	Full Name (Last, First, Middle Initial)		Date of Receipt						
J.	Mailing Address  City	State Zip Code	M M / D D / Y Y Y Y						
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period						
	Name of Employer	Occupation							
	Receipt For:  Primary General  Other (specify)	Election Cycle-to-Date							
S	SUBTOTAL of Receipts This Page (optional)		2600.00						
-	COTAL This Derived (lest need this line number of	nh.d	6700.00						

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FC	OR.	LINE	NU	MBER:	PAGE		7 OF		14		
Use separate schedule(s)	(c	hec	k onl	y or	ne)							
for each category of the		11a 11b 11c								11d		
Detailed Summary Page			12	X	13a		13b		14		15	
not be sold or used by any person for the purpose of soliciting contributions												

A . (		12 1 100 100 114 10
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) STOCKER IN CONGRESS		
Full Name (Last, First, Middle Initial)  Mrs. Barbara H Stocker  Mailing Address 2518 Meredith Dr  City  DeSoto  FEC ID number of contributing federal political committee.  Name of Employer  N/A  Receipt For: 2014  Primary General  Other (specify)	State Zip Code MO 63020  C H4MO08212  Occupation Retired  Election Cycle-to-Date	Date of Receipt  10 29 2013  Transaction ID: SA13A.4181  Amount of Each Receipt this Period  6000.00  personal funds
Full Name (Last, First, Middle Initial)  Mrs. Barbara H Stocker  Mailing Address 2518 Meredith Dr  City  DeSoto  FEC ID number of contributing federal political committee.  Name of Employer  N/A  Receipt For: 2014  Primary  Other (specify)  Full Name (Last, First, Middle Initial)	State Zip Code MO 63020  C H4MO08212  Occupation Retired  Election Cycle-to-Date	Date of Receipt  M M M / 27 / 2013  Transaction ID : SA13A.4182  Amount of Each Receipt this Period  6000.00  personal funds
Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General Other (specify)	State Zip Code  C Occupation  Election Cycle-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y Y  Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of		12000.00

Candidate Name

Office Sought:

MO

STOCKER IN CONGRESS

District:

House

Senate President

80

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

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

### SCHEDULE B (FI ITEMIZED DISBUI

Image# 15950835539			
SCHEDULE B (FEC Form 3)	Use separate sc	` '	FOR LINE NUMBER: PAGE 8 OF 14 (check only one)
ITEMIZED DISBURSEMENTS	for each categor Detailed Summa		X 17 18 19a 19 20a 20b 20c 21
Any information copied from such Reports and Statement or for commercial purposes, other than using the name a			
NAME OF COMMITTEE (In Full) STOCKER IN CONGRESS			
Full Name (Last, First, Middle Initial)			D
A. Mr. Chuck Banks			Date of Disbursement
Mailing Address H.C.1 BOX 1550			10 31 2013
City State Silva MO	Zip Code 63964		Amount of Each Disbursement this Period
Purpose of Disbursement	03904		5000.00
management		001	Transaction ID : SB17.4173
Candidate Name STOCKER IN CONGRESS		Category/ Type	
Office Sought: Y House Disbursement	For: 2014	Турс	
Senate Prim			
President	er (specify)		
State: MO District: 08			
Full Name (Last, First, Middle Initial)			
<sub>B.</sub> Mr. Chuck Banks			Date of Disbursement
Mailing Address			M M / D D / Y Y Y
Mailing Address H.C.1 BOX 1550			11 30 2013
City State	e Zip Code		Assessed of Early Diches assessed this Decised
Silva MO	63964		Amount of Each Disbursement this Period
Purpose of Disbursement			5000.00
management		001	Transaction ID : SB17.4180
Candidate Name STOCKER IN CONGRESS		Category/ Type	/
Office Sought: House Disbursement			
Senate Prim	-		
	er (specify)		
State: MO District: 08  Full Name (Last, First, Middle Initial)			
c. Mr. Chuck Banks			Date of Disbursement
Mailing Address H.C.1 BOX 1550			12 / D D / Y Y Y Y Y Y X
City State	Zip Code		Amount of Each Disbursement this Period
Silva MO	63964	T	5000.00
Purpose of Disbursement management		001	5000.00

001

Category/

Type

General

Disbursement For: 2014

Primary

Other (specify)

FE5AN018

State:

15000.00

Transaction ID: SB17.4179

### SCHEDULE B (FEC Form 3)

**PAGE** 9 14 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) STOCKER IN CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Mike Bell 2013 Mailing Address 2023 Grants Valley Ln 11 15 Zip Code City State Amount of Each Disbursement this Period MO Imperial 63052 Purpose of Disbursement 900.00 web production 001 Transaction ID: SB17.4175 Candidate Name Category/ STOCKER IN CONGRESS Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President MO State: District: Full Name (Last, First, Middle Initial) Mike Bock Date of Disbursement Mailing Address 1616-A 10 31 2013 City State Zip Code Amount of Each Disbursement this Period MO 63010 Arnold 575.61 Purpose of Disbursement printing 006 Transaction ID: SB17.4174 Candidate Name Category/ STOCKER IN CONGRESS Type Office Sought: House Disbursement For: 2014 Senate Primary General Other (specify) President State: MO District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type

State: Dis	trict:									
SUBTOTAL of Disburse	ements This Page	e (optional)	I	,	Ξ	Ξ	,	Ξ	1475.61	
TOTAL This Period (las	t page this line n	umber only)	_	,	Ξ	Ξ	j	1	6475.61	]

General

Disbursement For:

Primary

Other (specify)

Office Sought:

House

Senate

President

Use separate schedule(s)

FOR LINE NUMBER: (check only one)

**PAGE** 

10

×	13a
	13b

14

for each category of the Detailed Summary Page Transaction ID: SC/10.4117 NAME OF COMMITTEE (In Full) STOCKER IN CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mrs. Barbara H Stocker ★ General Mailing Address Other (specify)  $\blacktriangledown$ 2518 Meredith Dr City State ZIP Code MO 63020 DeSoto Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 5000.00 5000.00 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup>08<sup>M</sup> 20 2013 12/31/2014 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 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

FOR LINE NUMBER: (check only one)

PAGE

**X** 13a

14

OF

Detailed Summary Page 13b Transaction ID: SC/10.4119 NAME OF COMMITTEE (In Full) STOCKER IN CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mrs. Barbara H Stocker ★ General Mailing Address Other (specify)  $\blacktriangledown$ 2518 Meredith Dr City State ZIP Code MO 63020 DeSoto Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 150.00 0.00 150.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup>30 <sup>M</sup>08<sup>M</sup> 2013 12/31/2014 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 150.00 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 LINE NUMBER: (check only one)

PAGE

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for each category of the **X** 13a **LOANS** Detailed Summary Page 13b Transaction ID: SC/10.4120 NAME OF COMMITTEE (In Full) STOCKER IN CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mrs. Barbara H Stocker ★ General Mailing Address Other (specify)  $\blacktriangledown$ 2518 Meredith Dr City State ZIP Code MO 63020 DeSoto Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 5000.00 5000.00 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 09<sup>M</sup> <sup>D</sup> 17 2013 0.00 21/31/2014 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City

Outstanding:

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

FOR LINE NUMBER: (check only one)

**PAGE** 

13

×	13a
	13b

14

Detailed Summary Page Transaction ID: SC/10.4181 NAME OF COMMITTEE (In Full) STOCKER IN CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mrs. Barbara H Stocker ★ General Mailing Address Other (specify)  $\blacktriangledown$ 2518 Meredith Dr City State ZIP Code MO 63020 DeSoto Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 6000.00 0.00 6000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 29 <sup>M</sup> 10<sup>M</sup> 2013 12/31/2014 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 6000.00 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

FOR LINE NUMBER:

PAGE

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**X** 13a

14

(check only one) Detailed Summary Page 13b Transaction ID: SC/10.4182 NAME OF COMMITTEE (In Full) STOCKER IN CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Mrs. Barbara H Stocker General Mailing Address Other (specify)  $\blacktriangledown$ 2518 Meredith Dr City State ZIP Code MO 63020 DeSoto Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 6000.00 0.00 6000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м <sub>= м</sub> 2013 12/31/2014 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 6000.00 TOTALS This Period (last page in this line only) ..... 22150.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.