

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

Thompson for Congress

ADDRESS (number and street)

30151 Tomas

Check if different than previously reported. (ACC)

Rancho Sta Margarita

CA

92688

2. FEC IDENTIFICATION NUMBER ▼

C C00514695

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

OR

05

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

04 / 26 / 2012

through

M M /

D D /

Y Y Y Y

06 / 30 / 2012

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 Betty Presley

Signature of Treasurer Betty Presley

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

07 / 09 / 2012

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Thompson 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))....	2369.12	8004.12
(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)).....	2369.12	8004.12
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5008.60	7471.73
(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)).....	5008.60	7471.73
8. Cash on Hand at Close of Reporting Period (from Line 27).....	536.63	
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).....	1795.95	

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

Thompson for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 26 / 2012 To: M M / D D / Y Y Y Y 06 / 30 / 2012

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).....	1850.00	6400.00
(ii) Unitemized.....	519.12	1504.12
(iii) TOTAL of contributions from individuals ▶	2369.12	7904.12
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	100.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	2369.12	8004.12
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	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	4.24	4.24
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	2373.36	8008.36

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5008.60	7471.73
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) ►	5008.60	7471.73

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3171.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2373.36
25. SUBTOTAL (add Line 23 and Line 24).....	5545.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5008.60
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	536.63

**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 13
	<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)
Thompson for Congress

A. Full Name (Last, First, Middle Initial)
William Frohnmayr

Mailing Address **PO Box 5729**

City **Salem** State **OR** Zip Code **97304**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 08 / 2012

Transaction ID : INCA244

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Debora Nearman

Mailing Address **2570 Greenwood Rd S**

City **Independence** State **OR** Zip Code **97351**

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

Name of Employer **OR Dept of Fish & Wildlife** Occupation **Analyst**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 08 / 2012

Transaction ID : INCA243

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Diane E. Fritz

Mailing Address **10115 Parrish Gap Rd**

City **Turner** State **OR** Zip Code **97392**

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

Name of Employer **Diane E. Fritz, CPA** Occupation **CPA**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 22 / 2012

Transaction ID : INCA248

Amount of Each Receipt this Period
100.00

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

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

550.00

**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 13
	<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)
Thompson for Congress

A. Full Name (Last, First, Middle Initial)
Thomas Hammer

Mailing Address 2490 Church St SE

City Salem State OR Zip Code 97302

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2012

Transaction ID : INCA246

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
William Rose

Mailing Address 584 Dune Oaks

City Georgetown State SC Zip Code 29440

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2012

Transaction ID : INCA250

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Diane E. Fritz

Mailing Address 10115 Parrish Gap Rd

City Turner State OR Zip Code 97392

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

Name of Employer Diane E. Fritz, CPA Occupation CPA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2012

Transaction ID : INCA259

Amount of Each Receipt this Period
50.00

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

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

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 OF 13
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
Thompson for Congress

A. Full Name (Last, First, Middle Initial)
Diane E. Fritz

Mailing Address 10115 Parrish Gap Rd

City State Zip Code
Turner OR 97392

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

Name of Employer Occupation
Diane E. Fritz, CPA CPA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2012

Transaction ID : INCA266

Amount of Each Receipt this Period
50.00

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

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

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

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

50.00

1850.00

**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 8 OF 13
	<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	

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)
Thompson for Congress

A. Full Name (Last, First, Middle Initial)
Fred Thompson

Mailing Address 4554 12th Avenue South

City Salem State OR Zip Code 97302

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

Name of Employer New York Life Insurance Co Occupation Insurance Agent

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 495.95

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2012

Transaction ID : PAYA262

Amount of Each Receipt this Period
 _____ 395.95

Travel & Print Ad

[MEMO ITEM]

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

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

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

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

_____ 0.00

_____ 0.00

**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 9 OF 13
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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)
Thompson for Congress

Full Name (Last, First, Middle Initial) A. Betty Presley & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 31051 Tomas		Amount of Each Disbursement this Period 1400.00 Transaction ID : EXPB239
City RachStaMargarita	State CA Zip Code 92688	
Purpose of Disbursement Financial Analyst	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Supervinyl Signs & Banners		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address 390 Center St NE		Amount of Each Disbursement this Period 75.00 Transaction ID : EXPB241
City Salem	State OR Zip Code 97301	
Purpose of Disbursement Campaign Signs Costs	Category/Type 006	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Betty Presley & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 31051 Tomas		Amount of Each Disbursement this Period 1400.00 Transaction ID : EXPB253
City RachStaMargarita	State CA Zip Code 92688	
Purpose of Disbursement Financial Analyst	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2875.00
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 13		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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)
Thompson for Congress

Full Name (Last, First, Middle Initial) A. Mail Depot		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 4742 Liberty Road S		Amount of Each Disbursement this Period 50.00 Transaction ID : EXPB252
City Salem	State OR	
Zip Code 97302	Purpose of Disbursement Box Rental	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Betty Presley & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address 31051 Tomas		Amount of Each Disbursement this Period 1400.00 Transaction ID : EXPB257
City RachStaMargarita	State CA	
Zip Code 92688	Purpose of Disbursement Financial Analyst	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Fred Thompson		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address 4554 12th Avenue South		Amount of Each Disbursement this Period 194.60 Transaction ID : EXPB256
City Salem	State OR	
Zip Code 97302	Purpose of Disbursement Travel Costs	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1644.60
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 13		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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)
Thompson for Congress

A. PageWorks Graphic Design

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 5984

City Salem State OR Zip Code 97304

Purpose of Disbursement Design & Printing Costs

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 12 / 2012

Amount of Each Disbursement this Period: 489.00

Transaction ID : EXPB261

Category/Type: 001

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional) 489.00

TOTAL This Period (last page this line number only) 5008.60

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Thompson for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Betty Presley & Associates, Inc.

Nature of Debt (Purpose):
Financial Analyst

Mailing Address 31051 Tomas

City State Zip Code
RachStaMargarita CA 92688

Outstanding Balance Beginning This Period
1400.00

Transaction ID : PAYD200

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 1400.00 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Betty Presley & Associates, Inc.

Nature of Debt (Purpose):
Financial Analyst

Mailing Address 31051 Tomas

City State Zip Code
RachStaMargarita CA 92688

Outstanding Balance Beginning This Period
1400.00

Transaction ID : PAYD238

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 1400.00 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Betty Presley & Associates, Inc.

Nature of Debt (Purpose):
Financial Analyst

Mailing Address 31051 Tomas

City State Zip Code
RachStaMargarita CA 92688

Outstanding Balance Beginning This Period
0.00

Transaction ID : PAYD268

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
1400.00 0.00 1400.00

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 2) **TOTALS** This Period (last page this line number only) ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

1400.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Thompson for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Fred Thompson

Mailing Address 4554 12th Avenue South

City State Zip Code
Salem OR 97302

Nature of Debt (Purpose):
Travel & Print Ad

Outstanding Balance Beginning This Period **Transaction ID : PAYD262**

0.00

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

395.95 0.00 395.95

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

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

1) SUBTOTALS This Period This Page (optional)	395.95
2) TOTALS This Period (last page this line number only)	1795.95
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	1795.95