

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

M. Mark Mitchell for US Congress

ADDRESS (number and street) 7220 Craig Street

Check if different than previously reported. (ACC)

Fort Worth

TX

76112

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C C00552950

3. IS THIS REPORT NEW OR AMENDED

STATE DISTRICT

TX

33

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 TX

5. Covering Period

MM/DD/YYYY 10/20/2016

through

MM/DD/YYYY 11/28/2016

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

Young, Hannah, , ,

Signature of Treasurer

Young, Hannah, , ,

[Electronically Filed]

Date

MM/DD/YYYY 04/17/2017

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

Office Use Only

FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
M. Mark Mitchell for US 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))....	2525.00	9393.54
(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)).....	2525.00	9393.54
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3171.68	20530.04
(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)).....	3171.68	20530.04
8. Cash on Hand at Close of Reporting Period (from Line 27).....	-5063.30	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	7008.04	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	47680.01	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

M. Mark Mitchell for US Congress

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

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2016"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2016"/> (date after general election) through <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2016"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="2500.00"/>	<input type="text" value="7625.00"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="25.00"/>	<input type="text" value="1700.05"/>	<input type="text" value="0.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="2525.00"/>	<input type="text" value="9325.05"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	68.49	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
2525.00	9393.54	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	12731.24	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	12731.24	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
2525.00	22124.78	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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Write or Type Committee Name

M. Mark Mitchell for US Congress

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

II. DISBURSEMENTS

	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES	<input type="text" value="3171.68"/>	<input type="text" value="20530.04"/>	<input type="text" value="0.00"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 25

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
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(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	0.00	0.00
------	------	------

21. OTHER DISBURSEMENTS

7008.04	0.00	7008.04
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

10179.72	20530.04	7008.04
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

2525.00	9393.54	0.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

3171.68	20530.04	0.00
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2591.42
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	2525.00
25. SUBTOTAL (add Line 23 and Line 24).....	5116.42
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	10179.72
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	-5063.30

**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 25
(check only one)
 11a 11b 11c 11d
 12 13a 13b 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)
M. Mark Mitchell for US Congress

A. Full Name (Last, First, Middle Initial)
Robertson, Roberta, , ,

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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
 11 / 02 / 2016

Transaction ID : SA11AI.4275

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item
 In-kind - administrative services

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)..... ▶	_____ 2500.00
TOTAL This Period (last page this line number only)..... ▶	_____ 2500.00

**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 25	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
M. Mark Mitchell for US Congress

A. Full Name (Last, First, Middle Initial)
Mitchell, Monte, Mark, ,

Mailing Address 7220 Craig Street

City Fort Worth	State TX	Zip Code 76112
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Physician & Attorney
--------------------------	------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
12819.73

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Transaction ID : SA11D.4242

Amount of Each Receipt this Period

3265.31

Memo Item
Advertising Expenses

B. Full Name (Last, First, Middle Initial)
Mitchell, Monte, Mark, ,

Mailing Address 7220 Craig Street

City Fort Worth	State TX	Zip Code 76112
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Physician & Attorney
--------------------------	------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
12819.73

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : SA11D.4262

Amount of Each Receipt this Period

1400.00

Memo Item
Advertising Expense Seeking reimbursement

C. Full Name (Last, First, Middle Initial)
Mitchell, Monte, Mark, ,

Mailing Address 7220 Craig Street

City Fort Worth	State TX	Zip Code 76112
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Physician & Attorney
--------------------------	------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
12819.73

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : SA11D.4263

Amount of Each Receipt this Period

1458.75

Memo Item
Personel Expenses seeking reimbursement

SUBTOTAL of Receipts This Page (optional)..... ▶	0.00
TOTAL This Period (last page this line number only)..... ▶	

**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 9 OF 25	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
M. Mark Mitchell for US Congress

A. Full Name (Last, First, Middle Initial)
Mitchell, Monte, Mark, ,

Mailing Address 7220 Craig Street

City Fort Worth	State TX	Zip Code 76112
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Physician & Attorney
--------------------------	------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
12819.73

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : SA11D.4274

Amount of Each Receipt this Period
1500.00

Memo Item
Payment to MPAC. Seeking reimbursement

B. Full Name (Last, First, Middle Initial)
Mitchell, Monte, Mark, ,

Mailing Address 7220 Craig Street

City Fort Worth	State TX	Zip Code 76112
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Physician & Attorney
--------------------------	------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
12819.73

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2016

Transaction ID : SA11D.4288

Amount of Each Receipt this Period
10525.96

Memo Item
Advertising Expenses to be reimbursed

C. Full Name (Last, First, Middle Initial)
Mitchell, Monte, Mark, ,

Mailing Address 7220 Craig Street

City Fort Worth	State TX	Zip Code 76112
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Physician & Attorney
--------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
12819.73

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : SA11D.4290

Amount of Each Receipt this Period
5265.00

Memo Item
Advertising Expenses to be reimbursed

SUBTOTAL of Receipts This Page (optional)..... ▶	0.00
TOTAL This Period (last page this line number only)..... ▶	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 10 OF 25	
	<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)
M. Mark Mitchell for US Congress

Full Name (Last, First, Middle Initial) A. Govea, Alberto, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016	
Mailing Address 1500 Circle Drive			FEC Identification Number C	
City Fort Worth	State TX	Zip Code 76119	Amount of Each Disbursement this Period 275.00	
Purpose of Disbursement Advertising Expense		Category/ Type	Transaction ID : SB17.4300	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Lowe's Home Improvement			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2016	
Mailing Address 1111 Eastchase Parkway			FEC Identification Number C	
City Fort Worth	State TX	Zip Code 76120	Amount of Each Disbursement this Period 395.30	
Purpose of Disbursement Advertising Expense		Category/ Type	Transaction ID : SB17.4292	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Robertson, Roberta, , ,			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2016	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement In-kind - administrative services		Category/ Type	Transaction ID : SB17.4277	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	3170.30
TOTAL This Period (last page this line number only).....▶	3170.30

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)
17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
M. Mark Mitchell for US Congress

A. M. Mark Mitchell for US Congress

Full Name (Last, First, Middle Initial)
M. Mark Mitchell for US Congress

Mailing Address 7220 Craig Street

City Fort Worth State TX Zip Code 76112

Purpose of Disbursement Loan Payback

Candidate Name Mitchell, Monte, Mark, ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 14 / 2016

FEC Identification Number
C C00552950

Amount of Each Disbursement this Period
7008.04

Transaction ID : SB21.4305

Memo Item

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
M M / D D / Y Y Y Y

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

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
M M / D D / Y Y Y Y

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	7008.04
TOTAL This Period (last page this line number only).....▶	7008.04

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/9.4305**

LOAN SOURCE Full Name (Last, First, Middle Initial) M. Mark Mitchell for US Congress		<input type="checkbox"/> Memo Item	Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	ZIP Code 76112	<input type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 7008.04	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 7008.04
------------------------------------	------------------------------------	--

TERMS	Date Incurred M 11 / D 14 / Y 2016	Date Due M M / D D / Y Y Y Y	Interest Rate (If none, enter 0) % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....▶	7008.04
TOTALS This Period (last page in this line only).....▶	7008.04

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4144**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mitchell, Monte, Mark, ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	ZIP Code 76112	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 3175.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 3175.00
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TERMS	Date Incurred M 11 / D 30 / Y 2015	Date Due M / D / Y none	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).....▶	3175.00
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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4148**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mitchell, Monte, Mark, ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	ZIP Code 76112	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 2000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2000.00
------------------------------------	------------------------------------	--

TERMS	Date Incurred M 02 / D 06 / Y 2016	Date Due M M / D D / Y none	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....▶	[] 2000.00
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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4159**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mitchell, Monte, Mark, ,		<input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	ZIP Code 76112	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 2000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2000.00
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TERMS	Date Incurred M 02 / D 24 / Y 2016	Date Due M M / D D / Y none	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).....▶	[] 2000.00
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.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4160**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mitchell, Monte, Mark, ,		<input type="checkbox"/> Memo Item	Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	ZIP Code 76112	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 350.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 350.00
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TERMS	Date Incurred M 05 / D 19 / Y 2016	Date Due M M / D D / Y none	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).....▶	350.00
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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4161**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mitchell, Monte, Mark, ,		<input type="checkbox"/> Memo Item	Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	ZIP Code 76112	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 50.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50.00
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TERMS	Date Incurred M 06 / D 23 / Y 2016	Date Due M M / D D / Y none	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).....▶	50.00
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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4217**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mitchell, Monte, Mark, ,		<input type="checkbox"/> Memo Item	Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	ZIP Code 76112	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 316.40	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 316.40
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TERMS	Date Incurred M 07 / D 25 / Y 2016	Date Due M M / D D / Y Unknown	Interest Rate (If none, enter 0) % (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).....▶	316.40
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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4218**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mitchell, Monte, Mark, ,		<input type="checkbox"/> Memo Item	Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	ZIP Code 76112	<input type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 512.16	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 512.16
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TERMS	Date Incurred M 08 / D 08 / Y 2016	Date Due M M / D D / Y Unknown	Interest Rate (If none, enter 0) % (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).....▶	512.16
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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4219**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mitchell, Monte, Mark, ,		<input type="checkbox"/> Memo Item	Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	ZIP Code 76112	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 1473.71	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1473.71
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TERMS	Date Incurred M 09 / D 02 / Y 2016	Date Due M M / D D / Y Unknown	Interest Rate (If none, enter 0) % (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).....▶	1473.71
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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4220**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mitchell, Monte, Mark, ,		<input type="checkbox"/> Memo Item	Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	ZIP Code 76112	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 28.97	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 28.97
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TERMS	Date Incurred M 09 / D 24 / Y 2016	Date Due M M / D D / Y Unknown	Interest Rate (If none, enter 0) % (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).....▶	28.97
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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **M. Mark Mitchell for US Congress** Transaction ID : **SC/10.4233**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mitchell, Monte, Mark, ,			<input type="checkbox"/> Memo Item	Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7220 Craig Street				
City Fort Worth	State TX	ZIP Code 76112	<input type="checkbox"/> Personal Funds of the Candidate	

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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TERMS	Date Incurred M 10 / D 14 / Y 2016	Date Due M / D / Y No date	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).....▶	10000.00
TOTALS This Period (last page in this line only).....▶	19906.24

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)

M. Mark Mitchell for US Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mitchell, Monte, Mark, ,			Nature of Debt (Purpose): Advertising Expenses
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	Zip Code 76112	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4245	
Amount Incurred This Period 3265.31	Payment This Period 0.00	Outstanding Balance at Close of This Period 3265.31

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mitchell, Monte, Mark, ,			Nature of Debt (Purpose): Personel expense
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	Zip Code 76112	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4247	
Amount Incurred This Period 2958.75	Payment This Period 0.00	Outstanding Balance at Close of This Period 2958.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mitchell, Monte, Mark, ,			Nature of Debt (Purpose): Advertising Expenses
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	Zip Code 76112	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4249	
Amount Incurred This Period 1400.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1400.00

1) SUBTOTALS This Period This Page (optional)	▶	7624.06
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)	▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 24 OF 25
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

M. Mark Mitchell for US Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mitchell, Monte, Mark, ,			Nature of Debt (Purpose): Advertising expenses seeking reimbursement
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	Zip Code 76112	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID : SD10.4268	
Amount Incurred This Period <input type="text" value="1400.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1400.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mitchell, Monte, Mark, ,			Nature of Debt (Purpose): Personal expenses seeking reimbursement
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	Zip Code 76112	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID : SD10.4269	
Amount Incurred This Period <input type="text" value="2958.75"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2958.75"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mitchell, Monte, Mark, ,			Nature of Debt (Purpose): Advertising Expenses
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	Zip Code 76112	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID : SD10.4281	
Amount Incurred This Period <input type="text" value="10525.96"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10525.96"/>	

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="14884.71"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

NAME OF COMMITTEE (In Full)
M. Mark Mitchell for US Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mitchell, Monte, Mark, ,			Nature of Debt (Purpose): Advertising Expenses
Mailing Address 7220 Craig Street			
City Fort Worth	State TX	Zip Code 76112	

Outstanding Balance Beginning This Period 0.00		Transaction ID : SD10.4282	
Amount Incurred This Period 5265.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5265.00	

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

1) SUBTOTALS This Period This Page (optional)	5265.00
2) TOTALS This Period (last page this line number only)	27773.77
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	19906.24
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	47680.01