

**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

Jacob Turk for Congress 2014

ADDRESS (number and street)

417 SE Annette Street



Check if different than previously reported. (ACC)

Lees Summit

MO

64063

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00563668

3. IS THIS REPORT

☐ NEW (N)

OR

☒ AMENDED (A)

STATE ▼ DISTRICT

MO

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  
08 / 07 / 2018

in the State of

MO

(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  
07 / 01 / 2018

through

M M / D D / Y Y Y Y  
07 / 18 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Turk, Donna, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Turk, Donna, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
06 / 17 / 2019

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)

PAGE 2 / 12

Write or Type Committee Name

Jacob Turk for Congress 2014

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 1 |   | 2 | 0 | 1 | 8 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 8 |   | 2 | 0 | 1 | 8 |

|  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)  |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....  | 4741.00                 | 24883.00                           |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....  | 0.00                    | 25.00                              |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 4741.00                 | 24858.00                           |
| 7. Net Operating Expenditures  |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....   | 1444.40                 | 16752.08                           |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....  | 0.00                    | 205.87                             |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 1444.40                 | 16546.21                           |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....   | 2846.45                 |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 926.97                  |                                    |

## 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)

PAGE 3 / 12

Write or Type Committee Name

Jacob Turk for Congress 2014

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 1 |   | 2 | 0 | 1 | 8 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 8 |   | 2 | 0 | 1 | 8 |

**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).....**

1300.00

19395.00

**(ii) Unitemized.....**

3441.00

5488.00

**(iii) TOTAL of contributions from individuals ▶**

4741.00

24883.00

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

0.00

0.00

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

4741.00

24883.00

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

926.97

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

926.97

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

205.87

**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)..... ▶**

4741.00

26015.84

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 12

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 1444.40                       | 16752.08                           |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 25.00                              |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 25.00                              |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 1444.40                       | 16777.08                           |

## **III. CASH SUMMARY**

|   |          |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | - 450.15 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 4741.00  |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 4290.85  |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 1444.40  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 2846.45  |

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

Form/Schedule: F3A

Transaction ID :

In response to the RFAI dated May 12, 2019 we are filing this amended report so the beginning and ending balances of each report match. The discrepancy was caused by our auditing of the campaign finances in anticipation of closing this committee. As we have gone through the reports of this election year we have been preparing amended reports using FECfile. We did not realize the unfiled amended reports would impact the balances of the reports we were filing for the post general and beyond reports. We are now in the process of filing the amended reports for 2018 to fix the discrepancy. We apologize for any confusion this may have caused. The original reason for the the Pre-Primary amended filing is some small expenses and receipts were incorrectly entered in the data entry for the original report.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 12

☒ 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)

**Jacob Turk for Congress 2014**

Full Name (Last, First, Middle Initial)

**A.**

**Greenspan, Peter, , ,**

Mailing Address 3661 NW Winding Woods Dr

City

Lees Summit

State

MO

Zip Code

64064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 03 2018

Transaction ID : SA11AI.5339

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

**Hodgdon, Bob, , ,**

Mailing Address 21405 W 73rd Terr

City

Shawnee

State

KS

Zip Code

66218

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
owner

Occupation  
Hodgdon Powder

Receipt For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 05 2018

Transaction ID : SA11AI.5348

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

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)..... ▶

1300.00

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

1300.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 12

|  |                             |                              |                              |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 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)

Jacob Turk for Congress 2014

Full Name (Last, First, Middle Initial)

**A. Square Space**

Mailing Address 459 Broadway

City  
New YorkState  
NYZip Code  
10013Purpose of Disbursement  
Website hosting

001

Candidate Name

Jacob Turk for Congress 2014

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO

District: 05

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 11  |   | 2018    |

FEC Identification Number

C C00563668

Amount of Each Disbursement this Period

5.00

Transaction ID : SB17.5424

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Turk, Jacob, , ,**

Mailing Address 417 SE Annette Street

City  
Lees SummitState  
MOZip Code  
64063Purpose of Disbursement  
Mileage reimbursement through 6/30

002

Candidate Name

Jacob Turk for Congress 2014

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO

District: 05

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 01  |   | 2018    |

FEC Identification Number

C C00563668

Amount of Each Disbursement this Period

1044.76

Transaction ID : SB17.5422

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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).....▶

1049.76

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

1049.76

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 8 OF 12

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5048

Jacob Turk for Congress 2014

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2018

Turk, Jacob, , ,

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
417 SE Annette Street

City

State

ZIP Code

Lees Summit

MO

64063

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

200.00

0.00

200.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 03 M /

D 31 D /

Y 2017 Y

M M /

D D /

Y 8/7/2018 Y

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

200.00

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

PAGE 9 OF 12

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5067

Jacob Turk for Congress 2014

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2018

Turk, Jacob, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

417 SE Annette Street

City

Lees Summit

State

MO

ZIP Code

64063

☒ Personal Funds of the Candidate

Original Amount of Loan

220.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

220.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 06 M /

D 30 D /

Y 2017 Y

M M /

D D /

Y 8/7/2018 Y

0.00

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

220.00

**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**

PAGE 10 OF 12

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5080

Jacob Turk for Congress 2014

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2018

Turk, Jacob, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

417 SE Annette Street

City

Lees Summit

State

MO

ZIP Code

64063

☐ Personal Funds of the Candidate

Original Amount of Loan

180.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

180.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 09 M /

D 30 D /

Y 2017 Y

M M /

D D /

Y 8/7/2018 Y

0.00

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

180.00

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

PAGE 11 OF 12

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5089

Jacob Turk for Congress 2014

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Turk, Jacob, , ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

417 SE Annette Street

City

Lees Summit

State

MO

ZIP Code

64063

☒ Personal Funds of the Candidate

Original Amount of Loan

56.97

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

56.97

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 12<sup>M</sup>/ D 30<sup>D</sup>

/ Y 2017 Y

M M

/ D D

/ Y 8/7/2018 Y

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

56.97

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

PAGE 12 OF 12

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5099

Jacob Turk for Congress 2014

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2018

Turk, Jacob, , ,

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
417 SE Annette Street

City

State

ZIP Code

Lees Summit

MO

64063

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

270.00

0.00

270.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 03 M /

D 31 D /

Y 2018 Y

M M /

D D /

Y 8/7/2018 Y

0.00

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

270.00

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

926.97

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