

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

NORTHSTAR LEADERSHIP PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="5889.50"/>	<input type="text" value="5889.50"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="519.34"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4653.40"/>	<input type="text" value="10053.99"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="5172.74"/>	<input type="text" value="15943.49"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="962.40"/>	<input type="text" value="11733.15"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="4210.34"/>	<input type="text" value="4210.34"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="36432.25"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 06/2004)

Write or Type Committee Name

NORTHSTAR LEADERSHIP PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	1000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	1000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	1000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	4653.40	9053.99
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	4653.40	10053.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4653.40	10053.99

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	962.40	1733.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	962.40	1733.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	10000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	962.40	11733.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	962.40	11733.15

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	1000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	1000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	962.40	1733.15
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	962.40	1733.15

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

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

FOR LINE NUMBER: PAGE 6 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
NORTHSTAR LEADERSHIP PAC

A. Full Name (Last, First, Middle Initial)
PD Marketing Services Inc

Mailing Address 15260 113th St N

City Stillwater State MN Zip Code 55082

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
8077.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2012

Transaction ID : SA17.5721

Amount of Each Receipt this Period
4653.40

List Rental Fee

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) ▼

Aggregate Year-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) ▼

Aggregate Year-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).....▶	4653.40
TOTAL This Period (last page this line number only).....▶	4653.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. Park Midway Bank NA

Mailing Address 2300 Como Avenue

City St Paul State MN Zip Code 55108

Purpose of Disbursement
November bank fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2012

Transaction ID : SB21B.5717

Amount of Each Disbursement this Period

8.00

Full Name (Last, First, Middle Initial)

B. Park Midway Bank NA

Mailing Address 2300 Como Avenue

City St Paul State MN Zip Code 55108

Purpose of Disbursement
Refund of merchant card services charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2012

Transaction ID : SB21B.5718

Amount of Each Disbursement this Period

-124.85

Full Name (Last, First, Middle Initial)

C. Park Midway Bank NA

Mailing Address 2300 Como Avenue

City St Paul State MN Zip Code 55108

Purpose of Disbursement
December bank service charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2012

Transaction ID : SB21B.5719

Amount of Each Disbursement this Period

3.00

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

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

-113.85

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
NORTHSTAR LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

A. Patton Boggs LLP

Mailing Address 2550 M Street NW

City Washington State DC Zip Code 20037

Purpose of Disbursement
Legal Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 28 / 2012

Transaction ID : SB21B.5720

Amount of Each Disbursement this Period

1076.25

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

1076.25

962.40

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 13
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Consulting - PAC Fundraising Fees
Mailing Address 7300 Hudson Blvd Suite 270	
City State Zip Code St Paul MN 55128	

Outstanding Balance Beginning This Period <input type="text" value="432.25"/>	Transaction ID : SD10.4641	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="432.25"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Consulting - PAC Fundraising Fees
Mailing Address 7300 Hudson Blvd Suite 270	
City State Zip Code St Paul MN 55128	

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>	Transaction ID : SD10.4767	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Consulting - PAC mgmt salaries, rent
Mailing Address 7300 Hudson Blvd Suite 270	
City State Zip Code St Paul MN 55128	

Outstanding Balance Beginning This Period <input type="text" value="3500.00"/>	Transaction ID : SD10.4768	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3500.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="6432.25"/>
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 13
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Consulting - PAC Fundraising Fees
Mailing Address 7300 Hudson Blvd Suite 270	
City State Zip Code St Paul MN 55128	

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>	Transaction ID : SD10.4769	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Consulting - PAC mgmt salaries, rent
Mailing Address 7300 Hudson Blvd Suite 270	
City State Zip Code St Paul MN 55128	

Outstanding Balance Beginning This Period <input type="text" value="3500.00"/>	Transaction ID : SD10.4770	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Consulting - PAC Fundraising Fees
Mailing Address 7300 Hudson Blvd Suite 270	
City State Zip Code St Paul MN 55128	

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>	Transaction ID : SD10.4771	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2500.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="8500.00"/>
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 13
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Consulting - PAC mgmt salaries, rent
Mailing Address 7300 Hudson Blvd Suite 270	
City State Zip Code St Paul MN 55128	

Outstanding Balance Beginning This Period <input type="text" value="3500.00"/>	Transaction ID : SD10.4772	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Consulting - PAC Fundraising Fees
Mailing Address 7300 Hudson Blvd Suite 270	
City State Zip Code St Paul MN 55128	

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>	Transaction ID : SD10.4773	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Consulting - PAC mgmt salaries, rent
Mailing Address 7300 Hudson Blvd Suite 270	
City State Zip Code St Paul MN 55128	

Outstanding Balance Beginning This Period <input type="text" value="3500.00"/>	Transaction ID : SD10.4774	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3500.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="9500.00"/>
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 13
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Consulting - PAC Fundraising Fees
Mailing Address 7300 Hudson Blvd Suite 270	
City State Zip Code St Paul MN 55128	

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>	Transaction ID : SD10.4775	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Consulting - PAC mgmt salaries, rent
Mailing Address 7300 Hudson Blvd Suite 270	
City State Zip Code St Paul MN 55128	

Outstanding Balance Beginning This Period <input type="text" value="3500.00"/>	Transaction ID : SD10.4776	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Consulting - PAC Fundraising Fees
Mailing Address 7300 Hudson Blvd Suite 270	
City State Zip Code St Paul MN 55128	

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>	Transaction ID : SD10.4777	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2500.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="8500.00"/>
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 13
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Consulting - PAC mgmt salaries, rent
Mailing Address 7300 Hudson Blvd Suite 270	
City State Zip Code St Paul MN 55128	

Outstanding Balance Beginning This Period <input type="text" value="3500.00"/>	Transaction ID : SD10.4778	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3500.00"/>

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 <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

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 <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="3500.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="36432.25"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="36432.25"/>