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FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	_	uthorized Com	_	Offic	ce Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT	•	ample: If typing, type er the lines.	12FE4M5	
LOU ANN FOR CON					1
ADDRESS (number and street)	6213 CHARLOT	TTE AVE SUITE 112			
▼ Check if different					
than previously reported. (ACC)	NASHVILLE			TN 372	09
2. FEC IDENTIFICATION I	MIMPED W	CITY ▲		STATE ▲	ZIP CODE ▲
2. FEC IDENTIFICATION I	NUMBER Y				STATE ▼ DISTRICT
C C00519546		3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	TN 06
4. TYPE OF REPORT (C	Choose One)	4)			
(a) Quarterly Reports:		(b) 12-Day PRE	-Election Report for t	he:	
April 15 Quarterly	Report (Q1)	Ш	Primary (12P)	General (12G)	Runoff (12R)
July 15 Quarterly			Convention (12C)	Special (12S)	
			M M / D E) / Y Y Y Y	in the
October 15 Quart	terly Report (Q3)	Election on			State of
January 31 Year-I	End Report (YE)	(c) 30-Day POS	T-Election Report for	the:	
			General (30G)	Runoff (30R)	Special (30S)
Termination Repo	rt (TER)	Election on	M M / D E) / Y Y Y Y	in the State of
5. Covering Period	07	^Y 2016 ^Y	through	09 / D D / Y	2016 Y
I certify that I have examined			nowledge and belief it	is true, correct and co	mplete.
Type or Print Name of Treasur	Arnold, Thoma er	is, C., ,			
An Signature of Treasurer	rnold, Thomas, C., ,		[Electronically Filed]	Date 10	14 / Y Y Y Y Y Y Y 2016
NOTE: Submission of false, erro	neous, or incomplete	e information may	subject the person sign	ning this Report to the pe	enalties of 52 U.S.C. §30109
Office Use				F	EC FORM 3
Only					(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
LOU ANN FOR CONGRESS

2016 2016 09 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 0.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 0.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 0.00 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 0.00 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 128.32 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 228000.00 Schedule C and/or Schedule D).....

For further information contact:

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

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

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 05/2016) Write or Type Committee Name

of Receipts

PAGE 3 / 8

LOU ANN FOR CONGRESS						
Report Covering the Period:	From:	07 D D / Y Y Y Y Y O10 2016	To:	09 / D = D	/ Y Y Y Y Y Y 2016	

	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)	0.00	0.00	
	(ii) Unitemized	0.00	0.00	
	(iii) TOTAL of contributions from individuals	0.00	0.00	
((b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees (such as PACs)	0.00	0.00	
	(d) The Candidate(e) TOTAL CONTRIBUTIONS	0.00	0.00	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00	
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	
3.	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	
	OFFSETS TO OPERATING			
	EXPENDITURES Refunds, Rebates, etc.)	0.00	0.00	
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00	
	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	0.00	0.00	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
17.	OPERATING EXPENDITURES	0.00	0.00	
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	
	man Political Committees	200		
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00	
	(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)	0.00	0.00	
	III. CASH SU	IMMARY		
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	128.32	
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)				
25. SUBTOTAL (add Line 23 and Line 24)			128.32	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)				
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		128.32	

SCHEDULE C (FEC Form 3) **LOANS**

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

PAGE 5 OF FOR LINE NUMBER: **X** 13a (check only one)

8

13b Transaction ID: SC/10.4109 NAME OF COMMITTEE (In Full) LOU ANN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary ZELENIK, LOU ANN, , , General Mailing Address 2620 SEQUOYA TRACE Other (specify) \blacktriangledown State ZIP Code City X Personal Funds of the Candidate TN 37127 **MURFREESBORO** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 15000.00 0.00 15000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D31 D M 05M Ž01Ž Y01/01/2020 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 15000.00 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 6 OF FOR LINE NUMBER: (check only one)

X 13a 13b

8

	ME OF COMMITTEE (In Full) OU ANN FOR CONGRESS	3				Transact	tion ID : SC/10.4111	
	LOAN SOURCE Full Name (Last, First, Middle Initial) ZELENIK, LOU ANN, , ,				_ M	lemo Item	Election: 2012 X Primary General	
	Mailing Address 2620 SEQUOYA TRACE				Other (specify) ▼			
	City MURFREESBORO		State ZIP Code TN 37127			✗ Personal Funds of the Can	didate	
-	Original Amount of Loan	Cumulative Payment To Date Bala		Balar	nce Outstanding at Close of This	Period		
	200000	.00	0.00] [200000.00		
-	TERMS Date Incurred				terest Rate none, enter			
	M06 ^M / D29 ^D / Y Ž01Ž	Y	M M / D D	/ Yo	/ð1/2ð20 [×]	0.0	0/ () Voc	K No
	List All Endorsers or Guarantors	(if any) t	o Loan Source					
	1. Full Name (Last, First, Middle In	nitial)			Name of Emplo	yer		
-	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:		9 9	
	2. Full Name (Last, First, Middle Initial)			Name of Employer				
	Mailing Address			Occupation				
-	City	State	ZIP Code		Amount Guaranteed Outstanding:		7	
ŀ	3. Full Name (Last, First, Middle Initial) Mailing Address			Name of Employer				
					Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:		7 7	
	4. Full Name (Last, First, Middle In	tial)	•		Name of Emplo	oyer		
	Mailing Address			Occupation				
	City	State	ZIP Code		Amount Guaranteed			
					Outstanding:		9 9	
SL	SUBTOTALS This Period This Page (optional)							
TC	OTALS This Period (last page in this	line only	/)			→	7 7	Ħ
	Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.							
C	arry outstanding balance only to LIN	ง⊏ ၖ, Sch	ieauie D, for this	ine. If	no scheaule D,	carry forw	aru to appropriate line of Sumn	ıary.

SCHEDULE C (FEC Form 3) LOANS

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

PAGE 7
FOR LINE NUMBER: (check only one)

13a

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OF

		130		
NAME OF COMMITTEE (In Full) LOU ANN FOR CONGRESS		Transaction ID : SC/10.4112		
LOAN SOURCE Full Name (Last, First, Mailing Address 2620 SEQUOYA TRACE	Middle Initial)	Memo Item		
2620 SEQUOYA TRACE				
City	State	ZIP Code Personal Funds of the Candidate		
MURFREESBORO	TN	37127		
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period		
8000.00		0.00		
TERMS Date Incurred]	Date Due Interest Rate Secured: (If none, enter 0)		
M08 ^M / D01 ^D / Y Z01Z Y	M M / D D	/ Y12/31/2022		
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		
State	ZIF Code	Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed		
City State	ZIF Code	Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed		
	ZIF Code	Outstanding:		
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed		
Oity	ZIF Code	Outstanding:		
SUBTOTALS This Period This Page (optiona	l)	8000.00		
TOTALS This Period (last page in this line o	nıy)	· · · · · · · · · · · · · · · · · · ·		
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s 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 OF FOR LINE NUMBER: **X** 13a (check only one)

8

13b Transaction ID: SC/10.4113 NAME OF COMMITTEE (In Full) LOU ANN FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary ZELENIK, LOU ANN, , , General Mailing Address 2620 SEQUOYA TRACE Other (specify) \blacktriangledown State ZIP Code City X Personal Funds of the Candidate TN 37127 **MURFREESBORO** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D21 ^D ^M80^M Ž01Ž Y12/31/2023 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... 228000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.