

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Diane Smith for Montana

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))....	675.00	140882.18
(b) Total Contribution Refunds (from Line 20(d))	11100.00	11100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-10425.00	129782.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	16254.25	129392.17
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	109.99
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	16254.25	129282.18
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Diane Smith for Montana

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

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).....	400.00	108967.85
(ii) Unitemized.....	275.00	11990.11
(iii) TOTAL of contributions from individuals ▶	675.00	120957.96
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	11500.00
(d) The Candidate.....	0.00	8424.22
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	675.00	140882.18
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	1955.16
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	1955.16
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	109.99
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)..... ▶	675.00	142947.33

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16254.25	129392.17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	1955.16	1955.16
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	1955.16	1955.16
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	11100.00	11100.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	11100.00	11100.00
21. OTHER DISBURSEMENTS	0.00	500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	29309.41	142947.33

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	28634.41
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	675.00
25. SUBTOTAL (add Line 23 and Line 24).....	29309.41
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	29309.41
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

**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 5 OF 22
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Diane Smith for Montana

A. Full Name (Last, First, Middle Initial)
Liz Marchi

Mailing Address 40979 Valley View Rd

City Polson State MT Zip Code 59860-8350

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

Name of Employer Self employed Occupation Marketing Finance

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2012

Transaction ID : C8822766

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Glenn S. Rabin

Mailing Address 400 Epping Way

City Annapolis State MD Zip Code 21401-6600

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

Name of Employer Self-Employed Occupation Attorney/Policy Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2489.47**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2012

Transaction ID : C8826240

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mickey Sims

Mailing Address PO Box 71

City Bracey State VA Zip Code 23919-0071

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

Name of Employer BIT Communications Occupation General Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : C8809580

Amount of Each Receipt this Period
250.00

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

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

400.00

400.00

**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 6 OF 22			
	<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)
Diane Smith for Montana

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 1 ADP Boulevard		Amount of Each Disbursement this Period 53.00
City Roseland	State NJ	
Zip Code 07068	Purpose of Disbursement Payroll Service Fee	Transaction ID : D623016
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Artists New Media		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address P.O. Box 5089		Amount of Each Disbursement this Period 2317.52
City Whitefish	State MT	
Zip Code 59937	Purpose of Disbursement Videography	Transaction ID : D623091
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. CFO Compliance		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address One Park Row Fifth Floor		Amount of Each Disbursement this Period 1705.00
City Providence	State RI	
Zip Code 02903	Purpose of Disbursement Compliance Consulting	Transaction ID : D623004
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4075.52
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 22			
	<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)
Diane Smith for Montana

Full Name (Last, First, Middle Initial) A. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 318 S Orange St		Amount of Each Disbursement this Period 4.98
City Missoula	State MT	
Zip Code 59801	Purpose of Disbursement Gasoline	Transaction ID : D622576
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Facebook.com		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 25.01
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Advertising	Transaction ID : D622577
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Facebook.com		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 51.45
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Advertising	Transaction ID : D622578
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	81.44
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 22			
	<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)
Diane Smith for Montana

Full Name (Last, First, Middle Initial) A. Facebook.com			Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address 1601 S. California Ave			Amount of Each Disbursement this Period 34.65 Transaction ID : D622579
City Palo Alto	State CA	Zip Code 94304	
Purpose of Disbursement Advertising		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. Facebook.com			Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 1601 S. California Ave			Amount of Each Disbursement this Period 33.20 Transaction ID : D622580
City Palo Alto	State CA	Zip Code 94304	
Purpose of Disbursement Advertising		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) c. Facebook.com			Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 1601 S. California Ave			Amount of Each Disbursement this Period 28.91 Transaction ID : D622581
City Palo Alto	State CA	Zip Code 94304	
Purpose of Disbursement Advertising		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	96.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 22			
	<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)
Diane Smith for Montana

Full Name (Last, First, Middle Initial) A. Facebook.com			Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 1601 S. California Ave			Amount of Each Disbursement this Period 27.82 Transaction ID : D622582
City Palo Alto	State CA	Zip Code 94304	
Purpose of Disbursement Advertising	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Facebook.com			Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 1601 S. California Ave			Amount of Each Disbursement this Period 25.95 Transaction ID : D622583
City Palo Alto	State CA	Zip Code 94304	
Purpose of Disbursement Advertising	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Facebook.com			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 1601 S. California Ave			Amount of Each Disbursement this Period 32.97 Transaction ID : D622584
City Palo Alto	State CA	Zip Code 94304	
Purpose of Disbursement Advertising	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	86.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 22			
	<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)
Diane Smith for Montana

Full Name (Last, First, Middle Initial) A. Facebook.com		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 31.20 Transaction ID : D622585
City Palo Alto State CA Zip Code 94304	Purpose of Disbursement Advertising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Facebook.com		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2012
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 2.61 Transaction ID : D623006
City Palo Alto State CA Zip Code 94304	Purpose of Disbursement Advertising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Facebook.com		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 28.42 Transaction ID : D623007
City Palo Alto State CA Zip Code 94304	Purpose of Disbursement Advertising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	62.23
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 22			
	<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)
Diane Smith for Montana

Full Name (Last, First, Middle Initial) A. Facebook.com		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 36.09
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Advertising	Transaction ID : D623008
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Facebook.com		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 40.69
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Advertising	Transaction ID : D623009
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Facebook.com		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 35.91
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Advertising	Transaction ID : D623010
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	112.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 22			
	<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)
Diane Smith for Montana

Full Name (Last, First, Middle Initial) A. Facebook.com		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 36.02
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Advertising	Transaction ID : D623011
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Facebook.com		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 38.16
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Advertising	Transaction ID : D623012
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Facebook.com		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 40.66
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Advertising	Transaction ID : D623013
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	114.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 22			
	<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)
Diane Smith for Montana

Full Name (Last, First, Middle Initial) A. First Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address P.O. Box 407066		Amount of Each Disbursement this Period 42.92 Transaction ID : D623015
City Fort Lauderdale	State FL	
Zip Code 33340	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Google		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 50.00 Transaction ID : D622592
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Web Expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Google		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 158.19 Transaction ID : D622996
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Web Expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	251.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 22			
	<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)
Diane Smith for Montana

Full Name (Last, First, Middle Initial) A. KULR-8		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 2045 Overland Avenue		Amount of Each Disbursement this Period 2057.00 Transaction ID : D622573
City Billings	State MT Zip Code 59102	
Purpose of Disbursement Advertising	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Max Media of Montana		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 900 Laskin Road		Amount of Each Disbursement this Period 1105.00 Transaction ID : D622571
City Virginia Beach	State VA Zip Code 23451	
Purpose of Disbursement Advertising	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Max Media of Montana		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 900 Laskin Road		Amount of Each Disbursement this Period 3400.00 Transaction ID : D622572
City Virginia Beach	State VA Zip Code 23451	
Purpose of Disbursement Advertising	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6562.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 22			
	<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)
Diane Smith for Montana

Full Name (Last, First, Middle Initial) A. NGP Van		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 1101 15th Street, NW, Suite 500		Amount of Each Disbursement this Period 2100.00 Transaction ID : D623002
City Washington State DC Zip Code 20005	Purpose of Disbursement Database	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NGP Van		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 1101 15th Street, NW, Suite 500		Amount of Each Disbursement this Period 1400.00 Transaction ID : D623003
City Washington State DC Zip Code 20005	Purpose of Disbursement Database	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Safeway		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address 110 West 13th Street		Amount of Each Disbursement this Period 72.99 Transaction ID : D622586
City Whitefish State MT Zip Code 59937	Purpose of Disbursement Gasoline	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3572.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 22			
	<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)
Diane Smith for Montana

Full Name (Last, First, Middle Initial) A. Safeway		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 110 West 13th Street		Amount of Each Disbursement this Period 65.83
City Whitefish	State MT	
Zip Code 59937	Purpose of Disbursement Gasoline	Transaction ID : D622587
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Billings Times		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2012
Mailing Address 2919 Montana Avenue		Amount of Each Disbursement this Period 590.00
City Billings	State MT	
Zip Code 59101	Purpose of Disbursement Advertising	Transaction ID : D622588
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Three Guys Building		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address 713 East 13th Street		Amount of Each Disbursement this Period 300.00
City Whitefish	State MT	
Zip Code 59937	Purpose of Disbursement Office Rent	Transaction ID : D623005
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	955.83
TOTAL This Period (last page this line number only).....	15972.15

**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 17 OF 22	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Diane Smith for Montana

Full Name (Last, First, Middle Initial) A. Diane Smith		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address P.O. Box 4786		Amount of Each Disbursement this Period 1429.84 Transaction ID : D623088
City Whitefish	State MT	
Zip Code 59937	Purpose of Disbursement Loan Repayment	Category/ Type
Candidate Name Diane Smith	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MT District: 00	

Full Name (Last, First, Middle Initial) B. Diane Smith		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address P.O. Box 4786		Amount of Each Disbursement this Period 17.50 Transaction ID : D623089
City Whitefish	State MT	
Zip Code 59937	Purpose of Disbursement Loan Repayment	Category/ Type
Candidate Name Diane Smith	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MT District: 00	

Full Name (Last, First, Middle Initial) c. Diane Smith		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address P.O. Box 4786		Amount of Each Disbursement this Period 507.82 Transaction ID : D623090
City Whitefish	State MT	
Zip Code 59937	Purpose of Disbursement Loan Repayment	Category/ Type
Candidate Name Diane Smith	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MT District: 00	

SUBTOTAL of Disbursements This Page (optional).....	1955.16
TOTAL This Period (last page this line number only).....	1955.16

**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 18 OF 22			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Diane Smith for Montana

Full Name (Last, First, Middle Initial) A. Alicia Blake		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address PO Box 700		Amount of Each Disbursement this Period 2500.00
City Whitefish	State MT	
Zip Code 59937-0700	Purpose of Disbursement Contribution Refund	Transaction ID : D622999
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Rick Blake		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address PO Box 700		Amount of Each Disbursement this Period 2100.00
City Whitefish	State MT	
Zip Code 59937-0700	Purpose of Disbursement Contribution Refund	Transaction ID : D622995
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Scott Ford		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 22311 Highway 10		Amount of Each Disbursement this Period 2500.00
City Little Rock	State AR	
Zip Code 72223	Purpose of Disbursement Contribution Refund	Transaction ID : D622997
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 22			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Diane Smith for Montana

Full Name (Last, First, Middle Initial) A. Stephen Kraskin		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 10605 Bit and Spur Ln		Amount of Each Disbursement this Period 2500.00 Transaction ID : D622998
City Potomac State MD Zip Code 20854-1564	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Allison O'Briant		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 2626 Cole Ave Ste 504		Amount of Each Disbursement this Period 1000.00 Transaction ID : D623001
City Dallas State TX Zip Code 75204-0822	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Kathryn Zachem		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 4728 23rd St N		Amount of Each Disbursement this Period 500.00 Transaction ID : D623000
City Arlington State VA Zip Code 22207-3409	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	11100.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Diane Smith for Montana** Transaction ID : **L1017**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
Diane Smith PERS FUNDS Primary
 Mailing Address P.O. Box 4786 General
 Other (specify) ▼

City State ZIP Code
 Whitefish MT 59937

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
507.82	507.82	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
02 / 13 / 2012	12/31/2012	0.00 % (apr)	<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).....	0.00
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) **Diane Smith for Montana** Transaction ID : L1018

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2012
Diane Smith PERS FUNDS Primary
 Mailing Address P.O. Box 4786 General
 Other (specify) ▼

City State ZIP Code
 Whitefish MT 59937

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1429.84	1429.84	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
03 / 22 / 2012	12/31/2012	0.00 % (apr)	<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).....	0.00
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) **Diane Smith for Montana** Transaction ID : **L1019**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
Diane Smith PERS FUNDS Primary
 Mailing Address P.O. Box 4786 General
 Other (specify) ▼

City State ZIP Code
 Whitefish MT 59937

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
17.50	17.50	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 10 / Y 2012	M M / D D / Y 12/31/2012	0.00 % (apr)	<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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	0.00
TOTALS This Period (last page in this line only).....	0.00

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