FEC FORM 3	AND DI	<b>FOFRE</b> SBURSE Authorized Cor	MENTS	Of	fice Use Only		
1. NAME OF COMMITTEE (in	TYPE OR PRIN full)		xample: If typing, typ ver the lines.	pe 12FE4M5			
			CONGRESS;	THE			
ADDRESS (number ar	nd street)						
Check if dif than previo reported. (A	usly ASHEVILLE				102 		
2. FEC IDENTIFIC	29	CITY 3. IS THIS REPORT	× NEW (N) OI	STATE AMENDED	ZIP CODE A STATE ▼ DISTRICT		
(a) Quarterly R April 15 July 15 Octobe	PORT (Choose One) eports: 5 Quarterly Report (Q1) Quarterly Report (Q2) r 15 Quarterly Report (Q3) r 31 Year-End Report (YE)	Election or	ST-Election Report for General (30G)	General (12G Special (12S)			
5. Covering Period <sup>M</sup> M / D D / Y Y Y Y 10 / 2013 through 12 / 31 / 2013							
I certify that I have e Type or Print Name	examined this Report and to the second terms of Treasurer	o the best of my k	nowledge and belief	it is true, correct and c	omplete.		
Signature of Treasure	ər John Kledis		[Electronically Filed]	Date	D         D         /         Y		
NOTE: Submission of Office Use Only FE5AN018	false, erroneous, or incomp	ete information may	v subject the person s		FEC FORM 3 (Revised 02/2003)		

Image# 14940199919

01/31/2014 01 : 11

PAGE 1 / 18

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 18

## Write or Type Committee Name

## COMMITTEE TO ELECT TERRY BELLAMY TO CONGRESS; THE

R	eport	Covering the Period: From:	0 / 0 / Y Y Y Y 2013 To:	12 / D D / Y Y Y Y 31 / 2013
			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))	4400.00	7325.00
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	-250.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	4400.00	7575.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	3954.64	8582.05
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	3954.64	8582.05
8.		h on Hand at Close of orting Period (from Line 27)	1124.99	
9.	the	ts and Obligations Owed <b>TO</b> Committee (Itemize all on edule C and/or Schedule D)	0.00	
10.	the	ts and Obligations Owed <b>BY</b> Committee (Itemize all on edule C and/or Schedule D)	19970.17	

## For further information contact:

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

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

	FEC Form 3 (Revised 12/2003)	TAILED SUMMARY PAGE of Receipts	PAGE 3 / 18
	rite or Type Committee Name	ELLAMY TO CONGRESS; THE	
R	eport Covering the Period: From:	/ D D / Y Y Y Y 01 2013 To:	M M / D D / Y Y Y Y 12 31 2013
	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)	150.00	650.00
	(ii) Unitemized	4250.00	6375.00
	(iii) TOTAL of contributions from individuals	4400.00	7025.00
		0.00	
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>		0.00
	(such as PACs)	0.00	0.00
	(d) The Candidate (e) TOTAL CONTRIBUTIONS	0.00	300.00
	(other than loans)	4400.00	7325.00
	(add Lines 11(a)(iii), (b), (c), and (d))	7 7 7 7	1323.00
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13.	LOANS:		
	(a) Made or Guaranteed by the Candidate	0.00	1460.00
		0.00	0.00
	(b) All Other Loans (c) TOTAL LOANS	· · · · · · · · · · · ·	
	(add Lines 13(a) and (b))	0.00	1460.00
14.	OFFSETS TO OPERATING EXPENDITURES		
	(Refunds, Rebates, etc.)	0.00	0.00
15.	OTHER RECEIPTS	0.00	0.00
16	(Dividends, Interest, etc.)	0.00	0.00
10.	<b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	4400.00	8785.00

of Disbursements PAGE 4 / 18 FEC Form 3 (Revised 02/2003) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 3954.64 8582.05 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans ..... (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 -250.00 Than Political Committees ..... 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) ..... (d) TOTAL CONTRIBUTION REFUNDS 0.00 -250.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS ..... 22. TOTAL DISBURSEMENTS 3954.64 8332.05 (add Lines 17, 18, 19(c), 20(d), and 21) **III. CASH SUMMARY** 

**DETAILED SUMMARY PAGE** 

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	679.63
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	4400.00
25. SUBTOTAL (add Line 23 and Line 24)	5079.63
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	3954.64
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	1124.99

SCHEDULE A (FEC Form 3)				FOR LINE NUMBER: PAGE 5 OF 18						
ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	X 11a 11b 11c 11d						
			Dotalioù ourintary i ugo	12 13a 13b 14 15						
				person for the purpose of soliciting contributions						
or	for commercial purposes, other than using th	e name and	address of any political commit	ee to solicit contributions from such committee.						
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)									
/	COMMITTEE TO ELECT TERF	RY BELLA	AMY TO CONGRESS;	THE						
Z	Full Name (Last First Middle Initial)									
	Full Name (Last, First, Middle Initial) Michael J. Adams									
Α.				Date of Receipt						
	Mailing Address 121 Courtland Avenue									
	City	State	Zip Code	12 11 2013						
	Asheville	NC	28801	Transaction ID : SA11AI.6651						
	Asheville		20001							
	FEC ID number of contributing	С		Amount of Each Receipt this Period						
	federal political committee.	U								
	Name of Employer	Occupation	2	100.00						
	Moog	CEO		, , , , , , , , , , , , , , , , , , , ,						
	Receipt For: 2012		velo to Data							
	Primary General	Election C	ycle-to-Date	_						
	Other (specify)		300.00							
			, ,							
_	Full Name (Last, First, Middle Initial)									
_	Darryl Hart			Date of Receipt						
В.	Mailing Address 5 Williamsburg Place									
	Williamsburg Flace	12 11 2013								
	City	State	Zip Code							
	Asheville	NC	28803	Transaction ID : SA11AI.6658						
	FEC ID number of contributing									
	federal political committee.	С		Amount of Each Receipt this Period						
				50.00						
	Name of Employer	Occupation	ו	50.00						
	Self-employed	Mortician/F	uneral Director							
	Receipt For: 2012	Election C	ycle-to-Date							
	Primary General									
	Other (specify)		250.00							
_				_						
	Full Name (Last, First, Middle Initial)									
С.				Date of Receipt						
	Mailing Address			M M / D D / Y Y Y Y						
	City	State	Zip Code							
	Only	Olaic	210 0000							
				—						
	FEC ID number of contributing	С		Amount of Each Receipt this Period						
	federal political committee.	U								
	Name of Employer	Occupation	1							
				y y y						
	Receipt For:	Election C	ycle-to-Date	—						
	Primary General		,							
	Other (specify)									
			, ,	4						
Г										
.	UBTOTAL of Receipts This Page (optional)			150.00						
F				-						
1	<b>OTAL</b> This Period (last page this line number	and d		150.00						

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS		Use separate scl for each categor Detailed Summar	y of the	FOR LINE NUMBER:         PAGE         6         OF         18           (check only one)         I17         18         19a         19b           20a         20b         20c         21
	for commercial purposes, other than using NAME OF COMMITTEE (In Full) COMMITTEE TO ELECT TEI	the name and a	address of any poli	tical committ	person for the purpose of soliciting contributions ee to solicit contributions from such committee. THE
Α.	Full Name (Last, First, Middle Initial) BuzzMakers, LLC Mailing Address 322 Shepherd St. NW	Date of Disbursement			
	City Washington Purpose of Disbursement Communications Consulting	State DC	Zip Code 20011	· · ·	Amount of Each Disbursement this Period 400.00
	Candidate Name Office Sought: House D Senate	isbursement For	: General	Category/ Type	Transaction ID : SB17.6637
	President       State:     District:       Full Name (Last, First, Middle Initial)	Other (s			
В.	BuzzMakers, LLC Mailing Address 322 Shepherd St. NW				Date of Disbursement
	City Washington Purpose of Disbursement Communications Consulting	State DC	Zip Code 20011		Amount of Each Disbursement this Period 197.00 Transaction ID : SB17.6639
	Candidate Name Office Sought: House D Senate President	isbursement For Primary Other (s	General	Category/ Type	
<u>с.</u>	State: District: Full Name (Last, First, Middle Initial) BuzzMakers, LLC				Date of Disbursement
	Mailing Address 322 Shepherd St. NW				12 / D D / Y Y Y Y 16 2013
	City Washington Purpose of Disbursement Communications Consulting		p Code 0011		Amount of Each Disbursement this Period
	Candidate Name	isbursement For		Category/ Type	Transaction ID : SB17.6640
_	Office Sought: House D Senate President State: District:	Primary Other (s	General		
s	<b>SUBTOTAL</b> of Disbursements This Page (op	tional)			799.00
Т	OTAL This Period (last page this line numb	per 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         18           X         17         18         19a         19b           20a         20b         20c         21		
		the name and a	address of any	political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.		
Α.		Date of Disbursement					
	Mailing Address 537 Hazel Mill Road				11 29 2013		
	City Asheville Purpose of Disbursement	State NC	Zip Code 28806		Amount of Each Disbursement this Period		
	Equipment Rental Candidate Name			Category	Transaction ID : SB17.6624		
	Senate President	sbursement For Primary Other (s	Gener	al Type			
В.	State:     District:       Full Name (Last, First, Middle Initial)       MMS				Date of Disbursement		
	Mailing Address P.O. Box 7557				12 / D D / Y Y Y Y 12 10 2013		
	City Asheville Purpose of Disbursement Mailing Expenses	State NC	Zip Code 28802		Amount of Each Disbursement this Period 258.15		
	Candidate Name			Category/ Type	Transaction ID : SB17.6632		
	Office Sought: House Di Senate President State: District:	sbursement For Primary Other (s	Gener	al			
	Full Name (Last, First, Middle Initial)				Data of Diskurgement		
C.	Next Level Partners Mailing Address Post Office Box 15320				Date of Disbursement		
	City Washington		ip Code 20003-0320		Amount of Each Disbursement this Period		
Purpose of Disbursement Consultant - Compliance					200.00		
Candidate Name				Category/ Type	Transaction ID : SB17.6618		
	Office Sought: House Di Senate President State: District:	sbursement For Primary Other (s	Gener	al			
s	UBTOTAL of Disbursements This Page (opt	tional)			977.57		
Т	OTAL This Period (last page this line numb	er only)					

IT Ar	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS		y of the y Page used by any	
or	for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) COMMITTEE TO ELECT TERRY BEL			
Α.	Full Name (Last, First, Middle Initial) Next Level Partners Mailing Address Post Office Box 15320	Date of Disbursement		
	City     State       Washington     DC       Purpose of Disbursement Consultant - Compliance     DC	Zip Code 20003-0320		Amount of Each Disbursement this Period 450.50 Transaction ID : SB17.6641
	Candidate Name Office Sought: House Disbursement F Senate President Other State: District:		Category/ Type	
в.	Full Name (Last, First, Middle Initial)         On Demand         Mailing Address       200 Patton Avenue			Date of Disbursement
	City     State       Asheville     NC       Purpose of Disbursement     Printing       Candidate Name     Candidate Name	Zip Code 28801	Category/	Amount of Each Disbursement this Period 1013.24 Transaction ID : SB17.6634
	Office Sought: House Disbursement F Senate Prima President Other State: District:		Туре	
C.	Full Name (Last, First, Middle Initial) Sam's Club Mailing Address 645 Patton Avenue			Date of Disbursement
	City     State       Asheville     NC       Purpose of Disbursement Food, Beverages and Event Supplies     Candidate Name	Zip Code 28806	Category/	Amount of Each Disbursement this Period 101.57 Transaction ID : SB17.6627
	Office Sought: House Disbursement F Senate Prima President Other State: District:		Туре	
	UBTOTAL of Disbursements This Page (optional)			1565.31

								0 - 40
SCHEDULE C (FEC Form 3) LOANS				Use separate schedule(s) for each category of the Detailed Summary Page			MBER:	OF 18
ME OF COMMITTEE (In Full)	T TERRY I	BELLAM	Y TO CON		action I	D : SC/10.5082		
LOAN SOURCE Full Name TERRY M BELLAMY		ddle Initial)				ction: 2012 Primary General		
Mailing Address 48 LANCELOT LANE						Other (specify)	•	
City ASHEVILLE		State NC	ZIP Cod 28806	e				
Original Amount of Loan		Cumulative	Payment To [	Date B	alance (	Outstanding at C	Close of .	This Peric
<u> </u>	4000.00		3	0.00			400	00.00
TERMS Date Incurred			Date Due	Interest R	ate		Secure	d:
M07M / D27D / Y	ž012 <sup>v</sup>	M M / D	D / Y	2017 <sup>×</sup> 10	0.00	<b>%</b> (apr)		s No
List All Endorsers or Guara		o Loan Sou						
1. Full Name (Last, First, M	iddle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code	•	Amount Guaranteed Outstanding:				
2. Full Name (Last, First, Mic	ddle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code	•	Amount Guaranteed Outstanding:	- 7		_	
3. Full Name (Last, First, Mic	ddle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code	•	Amount Guaranteed Outstanding:	- 7			
4. Full Name (Last, First, Mic	ddle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code	•	Amount Guaranteed Outstanding:		7		
JBTOTALS This Period This F	Page (optional).						400	00.00

lage# 14940199920				
CHEDULE C (FEC Fo	orm 3)		Use separate sche for each category	
DANS			Detailed Summary	
AME OF COMMITTEE (In Full)				nsaction ID : SC/10.5084
COMMITTEE TO ELEC	IIERRII	BELLAINT TO C	UNGRESS, THE	
LOAN SOURCE Full Name (	Last, First, Mic	ddle Initial)		Election: 2012
TERRY M BELLAMY				Primary General
Mailing Address 48 LANCELOT LANE				Other (specify)
City		State ZIP	Code	
ASHEVILLE		NC 28	806	
Original Amount of Loan		Cumulative Paymen	t To Date	Balance Outstanding at Close of This Period
<u> </u>	9000.00	<u> </u>	0.00	9000.00
TERMS Date Incurred		Date I	Due Interest	Rate Secured:
	2012 <sup>Y</sup>	M M / D D /		10.00 % (apr) × Yes No
List All Endorsers or Guarar	ntors (if any) t	o Loan Source		
1. Full Name (Last, First, Mic	ddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
City	State	ZIF Code	Outstanding:	
2. Full Name (Last, First, Mid	dle Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Mid	dle Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Mid	dle Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	
UBTOTALS This Period This P	age (optional).		·····	9000.00
<b>OTALS</b> This Period (last page i	n this line only	λ		
enter mis i choù liast page i				y y y y

aye# 14940199929				r		
SCHEDULE C (FEC Form 3) OANS				Use separate sched		PAGE 11 OF 18
						(check only one) X 13a 13b
ME OF COMMITTEE (In Full)	FERRY I	BELLAMY TO	O CON		saction I	ID : SC/10.6536
LOAN SOURCE Full Name (Las					Flee	ction: 2012
TERRY M BELLAMY	-, ,	,			X	Primary General
Mailing Address 48 LANCELOT LANE						Other (specify)
City		State	ZIP Code	9		
ASHEVILLE		NC	28806			
Original Amount of Loan		Cumulative Pay	ment To D	Date E	Balance (	Outstanding at Close of This Peri
10	00.00			0.00		1000.00
TERMS Date Incurred		Da	ate Due	Interest F	Rate	Secured:
M 10 <sup>M</sup> / D 19 <sup>D</sup> / Y 2012	ž Y	M M / D D	/ Y	2017 <sup>Y</sup> 10	0.00	% (apr) × Yes
List All Endorsers or Guarantor		o Loan Source				
1. Full Name (Last, First, Middle	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
2. Full Name (Last, First, Middle	Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
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:	7	
UBTOTALS This Period This Page OTALS This Period (last page in th						1000.00

age# 14340133330					
CHEDULE C (FEC Form 3)				Use separate schedu for each category of	the FOR LINE NOMBER.
.OANS				Detailed Summary P	
					action ID : SC/10.6579
COMMITTEE TO ELECT	ERRYI	SELLAIVI Y		IGRESS; THE	
LOAN SOURCE Full Name (Las	t, First, Mic	ddle Initial)		[PERSONAL FUNDS]	Election: 2012
TERRY M BELLAMY					Primary General
Mailing Address 48 LANCELOT LANE					Other (specify)
City		State	ZIP Cod	е	
ASHEVILLE		NC	28806		
Original Amount of Loan		Cumulative P	ayment To [	Date Ba	alance Outstanding at Close of This Period
1	60.00		,	0.00	160.00
TERMS Date Incurred			Date Due	Interest Ra	ate Secured:
M04 <sup>M</sup> / D02 <sup>D</sup> / Y Ž013	Ϋ́Υ 3		_		00 % (apr) Yes No
List All Endorsers or Guarantor		o Loan Source	e		
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	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	
4. Full Name (Last, First, Middle	Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	- q - 1 - q - 1 - q - 1 - q - 1
UBTOTALS This Period This Page OTALS This Period (last page in th					160.00

-					
SCHEDULE C (FEC Form 3) JOANS		Use separate schedule for each category of th Detailed Summary Pag	PAGE 13 OF 18 FOR LINE NUMBER: (check only one) X 13a 13b		
AME OF COMMITTEE (In Full)	RY BELLAMY TO CO		tion ID : SC/10.6580		
LOAN SOURCE Full Name (Last, First, TERRY M BELLAMY Mailing Address 48 LANCELOT LANE	, Middle Initial)	[PERSONAL FUNDS]	Election: 2012 Primary General Other (specify)		
City	State ZIP Co	ode			
ASHEVILLE	NC 28806				
Original Amount of Loan 400.00	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Peric 400.00		
TERMS		<u>y</u>	<u> </u>		
Date Incurred	Date Due	n Ďemand <sup>Y</sup> 0.00			
List All Endorsers or Guarantors (if an					
1. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City Stat	e ZIP Code	Amount Guaranteed Outstanding:	y		
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City Stat	e ZIP Code	Amount Guaranteed Outstanding:	y y		
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City Stat	e ZIP Code	Amount Guaranteed Outstanding:	y 1 y 1 x x 1		
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City Stat	e ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 9 1		
<b>CUBTOTALS</b> This Period This Page (option <b>COTALS</b> This Period (last page in this line			400.00		

age# 14940199952						
CHEDULE C (FEC Form 3) DANS			Use separate schedul for each category of t	/ FOR LINE NOWIDER.		
JAN5				Detailed Summary Pa		
ME OF COMMITTEE (In Full)					ction ID : SC/10.6581	
OMMITTEE TO ELECT	TERRY	BELLAMY -	TO CON	GRESS; THE		
LOAN SOURCE Full Name (L	ast, First, Mic	Idle Initial)		[PERSONAL FUNDS]	Election: 2012	
TERRY M BELLAMY					Primary General	
Mailing Address 48 LANCELOT LANE					Other (specify)	
City		State	ZIP Cod	e		
ASHEVILLE		NC	28806			
Original Amount of Loan		Cumulative P	ayment To [	Date Bal	ance Outstanding at Close of This Perior	
<u> </u>	200.00			0.00	200.00	
TERMS Date Incurred			Date Due	Interest Rat	e Secured:	
	013 <sup>×</sup>		_	Demand 0.0		
List All Endorsers or Guarant	ors (if any) t	o Loan Source				
1. Full Name (Last, First, Mide	dle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1	
2. Full Name (Last, First, Midd	le Initial)			Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	- y	
3. Full Name (Last, First, Midd	le Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed		
4. Full Name (Last, First, Midd	le Initial)			Outstanding:	) )	
	ie initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 I I 9 I I A	
UBTOTALS This Period This Pa				·	200.00	

age# 14540155555					
CHEDULE C (FEC Form 3)		Use separate schedu			
			Detailed Summary P		
					action ID : SC/10.6610
OMMITTEE TO ELECT T				IGRESS; THE	
LOAN SOURCE Full Name (Last,	, First, Mic	Idle Initial)		[PERSONAL FUNDS]	
TERRY M BELLAMY					Primary General
Mailing Address 48 LANCELOT LANE					Other (specify)
City		State	ZIP Coc	le	
ASHEVILLE		NC	28806		
Original Amount of Loan		Cumulative F	Payment To	Date Ba	alance Outstanding at Close of This Perioc
40	00.00			0.00	400.00
TERMS Date Incurred			Date Due	Interest Ra	ate Secured:
M08 / D13 / Y 2013	Y	M M / D	_	Demand 0.	00 % (apr) Yes No
List All Endorsers or Guarantors		o Loan Sourc	e		
1. Full Name (Last, First, Middle	Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed	
2. Full Name (Last, First, Middle I	nitial)			Outstanding: Name of Employer	gg
Mailing Address				Occupation	
				Amount Guaranteed	
City	State	ZIP Code			
3. Full Name (Last, First, Middle I	nitial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle I	nitial)			Name of Employer	
Mailing Address				Occupation	
			-	Amount	
City	State	ZIP Code		Guaranteed Outstanding:	9 9 9 9
<b>UBTOTALS</b> This Period This Page <b>OTALS</b> This Period (last page in thi					400.00

aye# 14940199954					
CHEDULE C (FEC Form 3) OANS		Use separate schedul for each category of t Detailed Summary Pa	FOR LINE NUMBER: (check only one)		
					130
AME OF COMMITTEE (In Full)	ERRY	BELLAMY TO	O CON		ction ID : SC/10.6611
LOAN SOURCE Full Name (Las				[PERSONAL FUNDS]	Election: 2012
TERRY M BELLAMY				[	Primary General
Mailing Address 48 LANCELOT LANE					Other (specify)
City		State	ZIP Cod	e	
ASHEVILLE		NC	28806		
Original Amount of Loan		Cumulative Pay	ment To D	Date Bala	ance Outstanding at Close of This Perio
3	00.00			0.00	300.00
TERMS Date Incurred		D	ate Due	Interest Rate	e Secured:
M 09 / D 20 / Y 201:	Ý Š	M M / D D		Demand 0.00	
List All Endorsers or Guarantor		o 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	
				Amount	
City	State	ZIP Code		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:	
UBTOTALS This Period This Page	(optional).			······ ►	300.00
<b>OTALS</b> This Period (last page in th	nis line only	/)			15460.00
	-	,			7 7

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

SCHEDULE D (FEC Form 3)			separate	PAGE 17 OF	18
DEBTS AND OBLIGATIONS			edule(s) each	FOR LINE NUMBER: (check only one)	9
Excluding Loans			ered line)		9 10
NAME OF COMMITTEE (In Full)				· · ·	
COMMITTEE TO ELECT					ΙE
A. Full Name (Last, First, Middle Initial) of Debto	or or Creditor			ebt (Purpose): losure Reporting	
Whitney W. Burns					
Mailing Address P.O. Box 1174					
City State	Zip Code				
Springfield	VA 22151				
Outstanding Balance Beginning This Period			Transactio	on ID : SD10.6615	
1000.00					
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of This Pe	eriod
0.00		0.00		1000.00	
				, , , , , , , , , , , , , , , , , , , ,	
B. Full Name (Last, First, Middle Initial) of Debtor	r or Creditor			ebt (Purpose):	
BuzzMakers, LLC			Communica	ations Consulting	
Mailing Address 322 Shepherd St. NW					
City State	Zip Code				
Washington	DC 20011				
Outstanding Balance Beginning This Period			Transactio	on ID : SD10.5068	
3112.67					
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of This Pe	eriod
			Outstandi		enou
0.00	20	2.00		2910.67	
C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of D	ebt (Purpose):	
BuzzMakers, LLC				ations Consulting	
Mailing Address 322 Shepherd St NW					
Mailing Address 322 Shepherd St. NW					
City	State Zip Code				
Washington	DC 20011				
Outstanding Balance Beginning This Period			Transacti	on ID : SD10.5069	
597.00					
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of This Pe	eriod
0.00	59	7.00		0.00	
		<u> </u>		-y - 1 - y - 1 - w - 1	
1) SUBTOTALS This Period This Page (optional)		►		, 3910.67	
2) TOTALS This Period (last page this line number	only)	<b>&gt;</b>		<u></u>	
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page only)	▶		7 1 7 1 1 7	4
4) ADD 2) and 3) and carry forward to appropriate	e line of Summary Page (last page o	only) 🕨		-y	

FEC Schedule D (Form 3) (Revised 02/2003)

DEBTS AND OBLIGATIONS       all chailes in authority on signature of the chailes in authority on the chailes in authority of the chailes in authority authority authority of the chailes in authority auth	SCHEDULE D (FEC Form 3)			(Use	separate	PAGE	18 OF 18
Excluding Loans       numbered line)       Outcoded y day day       10         NAME OF COMMITTEE (In Full)       COMMITTEE TO ELECT TERRY BELLAMY TO CONGRESS; THE         A. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose);         Mailing Address       Pest Office Box 15320         City       State       Zip Code         Vest Level Partners       Nature of Debt (Purpose);         Mailing Address       Deputed ***         Outstanding Balance Beginning This Period       Transaction ID: SD10.4219         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         0.00       650.503       B. Full Name (Last, First, Middle Initial) of Debtor or Creditor         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         City       State       Zip Code       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This	DEBTS AND OBLIGATIONS				• • •		
NAME: OF COMMITTEE (in Full)         COMMITTEE TO ELECT TERRY BELLAMY TO CONGRESS; THE         A. Full Name (Last, First, Middle Initial) of Debtor or Creditor         Nating Address       Post Office Box 15320         City       State         Quistanding Balance Beginning This Period       Cutstanding Balance Beginning This Period         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Maling Address       City         City       State         0.00       Payment This Period         0.00       Payment This Period         0.01       90000         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Maling Address       City         City       State         Zip Code       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close						(Check only one)	
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose): Consultant - Compliance *** Disputed ***         Mailing Address       Zip Code         Washington       DC         Outstanding Balance Beginning This Period       Transaction ID : SD10.4210         0.00       650.50         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City         City       State         Zip Code       Outstanding Balance at Close of This Period         0.00       650.50         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       Zip Code         Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance at Close of This Period       Seg9.50         Anount I			1				
Next Level Partners       Consultant - Compliance *** Disputed ***         Mailing Address       Post Office Box 15320         City       State       Zip Code         Washington       DC       2003-0320         Outstanding Balance Beginning This Period       Transaction ID : SD10.4210         Image: State       Disputed ***         Mailing Address       Outstanding Balance at Close of This Period         Image: State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Image: State       Zip Code         Outstanding Balance Beginning This Period       Payment This Period         Image: State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Image: State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Image: State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Image: State       Zip Code         Outstanding Balance at Close of This Period       Image: State         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Image: State <t< th=""><th>COMMITTEE TO ELECT</th><th>TERR</th><th>/ BELLAN</th><th></th><th></th><th></th><th>S; THE</th></t<>	COMMITTEE TO ELECT	TERR	/ BELLAN				S; THE
Next Level Painters         Mailing Address Post Office Box 15320         City       State       Zip Code         Washington       DC       2003-0320         Outstanding Balance Beginning This Period       Transaction ID : SD10.4210         1250.00       Amount Incurred This Period       Outstanding Balance at Close of This Period         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         City       State       Zip Code       Outstanding Balance at Close of This Period         City       State       Zip Code       Outstanding Balance at Close of This Period         City       State       Zip Code       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       State         City       State       Zip Code       Outstanding Balance at Close of This Period         Image: City       State       Zip Code       Outstanding Balance at Close of This Period		or Creditor					putod ***
City       State       Zip Code         DC       20003-0320         Outstanding Balance Beginning This Period       Transaction ID : SD10.4210         125200       Amount Incurred This Period       Payment This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Dutter of Debt (Purpose):         Mailing Address       City       State       Zip Code       Outstanding Balance at Close of This Period         Mailing Address       City       State       Zip Code       Outstanding Balance at Close of This Period         Image: State       Zip Code       Outstanding Balance at Close of This P	Next Level Partners				Consultant	- compliance Dis	puted
Washington       DC       20003-0320         Outstanding Balance Beginning This Period       1250.00       Transaction ID : SD10.4210         Amount Incurred This Period       0.00       650.50       Outstanding Balance at Close of This Period         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Dabt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         City       State       Zip Code       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         Instrument Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period       Image: State         City       State       Zip Code       Outstanding Balance at Close of This Period       Image: State       Image: State       State         I	Mailing Address Post Office Box 15320						
Outstanding Balance Beginning This Period       Transaction ID : SD10.4210         1250.00       Amount Incurred This Period       Outstanding Balance at Close of This Period         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Image: State       Zip Code       Outstanding Balance at Close of This Period         Image: State       Zip Code       Outstanding Balance at Close of This Period         Image: State       Zip Code       Outstanding Balance at Close of This Period <tr< th=""><th>City State</th><th>Zip Code</th><th></th><th></th><th></th><th></th><th></th></tr<>	City State	Zip Code					
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1250.00       Anount Incurred This Period       Outstanding Balance at Close of This Period         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Outstanding Balance Beginning This Period       Nature of Debt (Purpose):         Mailing Address       City       State         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         City       State       Zip Code         Outstanding Balance at Close of This Period       State         Internet This Period       Outstanding Balance at Close of This Period         Internet This Period       State         Internet This Period       State         Interne	Outstanding Balance Beginning This Period			·	Transactio	on ID : SD10.4210	
Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         B. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Payment This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Amount Incurred This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         Image: State       Zip Code       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         Image: State       Zip Code       Image: State       Zip Code       Image: State         Image: State       Zip Code       Image:	1250.00						
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Mailing Address         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Payment This Period       Outstanding Balance at Close of This Period         1) SUBTOTALS This Period This Page (optional)       \$       \$        \$          1) SUBTOTALS This Period (last page this line number only)       \$        \$        \$          3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)       \$        19970.17       19970.17	B. Full Name (Last First Middle Initial) of Debtor o	r Creditor			Nature of D	ebt (Purpose):	
City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Payment This Period       Outstanding Balance at Close of This Period         1)       SUBTOTALS This Period This Page (optional)       \$99,50         2)       TOTAL S This Period (last page this line number only)       \$15460.00         3)       TOTAL OUTSTANDING LOANS from Schedule C (last page only)       \$19970.17							
City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         Outstanding Balance Beginning This Period       Payment This Period       Outstanding Balance at Close of This Period         1)       SUBTOTALS This Period This Page (optional)       \$99,50         2)       TOTAL S This Period (last page this line number only)       \$15460.00         3)       TOTAL OUTSTANDING LOANS from Schedule C (last page only)       \$19970.17							
Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         1)       SUBTOTALS This Period This Page (optional)       \$39.50         2)       TOTAL OUTSTANDING LOANS from Schedule C (last page only)       \$4510.17         19970 17       19970 17	Mailing Address						
Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         1)       SUBTOTALS This Period This Page (optional)       \$39.50         2)       TOTAL OUTSTANDING LOANS from Schedule C (last page only)       \$4510.17         19970 17       19970 17	City State	Zip Code					
Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         1)       SUBTOTALS This Period This Page (optional)       \$395.0         2)       TOTAL OUTSTANDING LOANS from Schedule C (last page only)       \$395.0		p 0000					
Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         1)       SUBTOTALS This Period This Page (optional)       \$99.50         2)       TOTALS This Period (last page this line number only)       \$ <ul> <li>4510.17</li> <li>3)</li> <li>TOTAL OUTSTANDING LOANS from Schedule C (last page only)</li> <li>19970.17</li> </ul>	Outstanding Balance Beginning This Period			I			
Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         1)       SUBTOTALS This Period This Page (optional)       \$59,50         2)       TOTAL S This Period (last page this line number only)       \$15460.00         1)       SUBTOTAL OUTSTANDING LOANS from Schedule C (last page only)       \$15460.00							
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor       Nature of Debt (Purpose):         Mailing Address       City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         1)       SUBTOTALS This Period This Page (optional)       \$59,50         2)       TOTAL S This Period (last page this line number only)       \$15460.00         3)       TOTAL OUTSTANDING LOANS from Schedule C (last page only)       \$15460.00							
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Mailing Address         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         1)       SUBTOTALS This Period This Page (optional)       \$        \$							
Mailing Address         City       State       Zip Code         Outstanding Balance Beginning This Period       Outstanding Balance at Close of This Period         Amount Incurred This Period       Payment This Period       Outstanding Balance at Close of This Period         1)       SUBTOTALS This Period This Page (optional)       \$        \$		7				- 7 7	
City       State       Zip Code         Outstanding Balance Beginning This Period	C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor			Nature of De	ebt (Purpose):	
City       State       Zip Code         Outstanding Balance Beginning This Period							
City       State       Zip Code         Outstanding Balance Beginning This Period	Mailing Address						
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Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period          1) SUBTOTALS This Period This Page (optional) <ul> <li>599.50</li> <li>2) TOTALS This Period (last page this line number only)</li> <li>3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)</li> </ul> <ul> <li>15460.00</li> <li>19970.17</li> </ul>	City	State	Zip Code				
Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period          1) SUBTOTALS This Period This Page (optional) <ul> <li>599.50</li> <li>2) TOTALS This Period (last page this line number only)</li> <li>3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)</li> </ul> <ul> <li>15460.00</li> <li>19970.17</li> </ul>	Outstanding Balance Reginning This Period						
1) SUBTOTALS This Period This Page (optional)       599.50         2) TOTALS This Period (last page this line number only)       4510.17         3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)       15460.00							
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<ul> <li>a) TOTALS This Period (last page this line number only)</li></ul>							
<ul> <li>a) TOTALS This Period (last page this line number only)</li></ul>	<u> </u>	7		-		7 7	- / B
<ul> <li>a) TOTALS This Period (last page this line number only)</li></ul>					_		
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	1) SUBTOTALS This Period This Page (optional)			►			599.50
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)							4510.17
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	2) TOTALS This Period (last page this line number o	nly)		🕨		7 7	4510.17
19970 17	3) TOTAL OUTSTANDING LOANS from Schodule C	(last page only					15460.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)		has page only				7 7	
	4) ADD 2) and 3) and carry forward to appropriate li	ne of Summary	Page (last page on	nly) 🕨	L	7 7	19970.17

FEC Schedule D (Form 3) (Revised 02/2003)