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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		Authorized Com		,		Office Use Only
1. NAME OF COMMITTEE (in	TYPE OR PR	·	ample: If typinger the lines.	g, type	12FE4M5	
JERRY NOLT	E FOR CONGRES	S				
ADDRESS (number ar	nd street)	TH STREET				
Check if did than previous reported. (A	usly GLADSTON	JE			MO	64118
2. FEC IDENTIFIC	CATION NUMBER ▼	CITY ▲		!	STATE A	ZIP CODE
C C0049277	77	3. IS THIS REPORT	X NEW (N)	OR	AMEND (A)	STATE ▼ DISTRICT MO 06
(a) Quarterly R April 15	5 Quarterly Report (Q1)	(b) 12-Day PRE	-Election Repo Primary (12P) Convention (General (1	
Octobe	Quarterly Report (Q2) r 15 Quarterly Report (Q3)	Election on	M M /	D D /	Y Y Y Y	in the State of
× January	/ 31 Year-End Report (YE)	(c) 30-Day POS	T -Election Rep	ort for the:		
			General (30G)	Runoff (30	R) Special (30S)
Termina	ation Report (TER)	Election on	M M /	D D /	Y Y Y Y	in the State of
5. Covering Period	M M / D D D 01	/ Y Y Y Y Y 2012	through	м м 12	/ 31 /	Y Y Y Y Y 2012
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.						
Type or Print Name	of Treasurer Alicia Nolte	•				
Signature of Treasure	er Alicia Nolte		[Electronically I	Filed] D	Date 01	25 / Y Y Y Y Y 2013
	false, erroneous, or incom	plete information may	subject the per	son signing t	his Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

JERRY NOLTE FOR CONGRESS

R	eport	Covering the Period: From:	10 ^M / 01 / Y Y Y Y Y Y TO:	12 / D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
			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))	0.00	40979.95
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	950.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	40029.95
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	1030.00	79818.66
	(b)	Total Offsets to Operating Expenditures (from Line 14)	5.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1025.00	79818.66
8.		orting Period (from Line 27)	1346.78	
9.	the	ots and Obligations Owed TO Committee (Itemize all on sedule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on ledule C and/or Schedule D)	41000.00	

For further information contact:

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

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

Report of Receipts and Disbursements

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- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name JERRY NOLTE FOR CONGRESS 2012 12 31 2012 Report Covering the Period: From: 10 01 To: I. RECEIPTS **COLUMN A COLUMN B COLUMN C Total this Period Election Cycle Total as of** Total for 06 2012 07 (date after general election) (date of general election) through 11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than 31 2012 Political Committees (last day of reporting period) Itemized (use Schedule A) 0.00 24150.04 0.00 (ii) Unitemized 0.00 10279.48 0.00 (iii) Total of contributions from individuals 0.00 34429.52 0.00 Political Party Committees 0.00 0.00 0.00 Other Political Committees 0.00 0.00 1550.00

Report of Receipts and Disbursements

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FEC Form 3 (Revised 1/01)

COLUMN C **COLUMN A COLUMN B Total this Period** Election Cycle Total as of * Total for * (date after general election) (date of general election) through * (last day of reporting period) (* See page 5 for date) (* See page 5 for dates) The Candidate 5000.43 0.00 0.00 TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d)) 40979.95 0.00 0.00 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES 0.00 0.00 0.00 13. LOANS: (a) Made or Guaranteed by the Candidate 0.00 41000.00 0.00 All Other Loans 0.00 0.00 0.00 (c) TOTAL LOANS (add Lines 13(a) and (b)) 0.00 41000.00 0.00 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.) 0.00 5.00 5.00 15. OTHER RECEIPTS (Dividends, Interest, etc.) 0.00 130.49 0.00 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) 5.00 82110.44 5.00

ı		port of Receipts and Disbursements	TAGE
	FEC Form 3 (Revised 1/01)		PAGE 5 / 13
	Irite or Type Committee Name		
J	IERRY NOLTE FOR CONGRESS		
R	report Covering the Period: From:	0 01 2012	To: 12 31 2012
	II. DISBURSEMENTS		
	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17.	OPERATING EXPENDITURES		
	1030.00	79818.66	0.00
18.	TRANSFERS TO OTHER AUTHORIZED CO	MMITTEES	
	0.00	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the C	andidate	
	0.00	0.00	0.00
	(b) Of All Other Loans		
	0.00	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines	s 19(a) and 19(b))	
	0.00	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political	Committees	
	0.00	950.00	0.00
	(b) Political Party Committees		
	0.00	0.00	0.00

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
	(c) Other Political Committees (such as PAC	Ss)	
	0.00	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add	I Lines 20(a), (b) and (c))	
	0.00	950.00	0.00
21.	OTHER DISBURSEMENTS		
	0.00	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18	, 19(c), 20(d) and 21)	
	1030.00	80768.66	0.00
	(Note: Substitute in lieu of Line #6 of 0.00	of Summary Page for this report only; subtr	act Line 20(d) from Line 11(e)) 0.00
	IV. NET OPERATING EXPENDITURE	S	
	(Note: Substitute in lieu of Line #	7 of Summary Page for this report only; su	btract Line 14 from Line 17)
	1025.00	79818.66	-5.00
	V. CASH SUN	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	2371.78
24.	TOTAL RECIEPTS THIS PERIOD (from Line	16)	5.00
25.	SUBTOTAL (add Line 23 and Line 24)		2376.78
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	1030.00
27.	CASH ON HAND AT CLOSE OF REPORTIN	G PERIOD (subtract Line 26 from Line 25)	1346.78

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	Detailed Suffilliary Fage	<u></u>		20a	20b	20c	21
	ny information copied from such Reports and Statements may not be sold or used by for commercial purposes, other than using the name and address of any political co						
\rangle	NAME OF COMMITTEE (In Full) DERRY NOLTE FOR CONGRESS						
۹.	Full Name (Last, First, Middle Initial) the Bespoke Group		Date		ursement	Y Y Y	v
	Mailing Address 140 Walnut Suite 202		1		06	2012	
	City State Zip Code Kansas City MO 64106		Amo	unt of Ea	ach Disburse	ement this P	-
	Purpose of Disbursement FEC Compliance Services		Transa	ction ID	: SB17.472		30
		egory/ ype					
	Office Sought: House						
	Full Name (Last, First, Middle Initial)						
3.	Melling Address		Date		ursement	Y Y Y	Υ
	Mailing Address		L				_
	City State Zip Code		Amo	unt of Ea	ach Disburse	ement this P	eriod
	Purpose of Disbursement		L				-
		egory/ ype					
	Office Sought: House						
	Full Name (Last, First, Middle Initial)		Data	of Disbu	ıraamant		
Э.			_ Date		ursement	Y Y Y	r
	Mailing Address						
	City State Zip Code		Amo	unt of Ea	ach Disburs	ement this P	eriod
	Purpose of Disbursement		L				
		egory/ ype					
	Office Sought: House						
s	SUBTOTAL of Disbursements This Page (optional)			. ,	,	825.0	00
Т	FOTAL This Period (last page this line number only)					825.0	00

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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OF

LOANS (check only one) Detailed Summary Page Transaction ID: SC/10.4234 NAME OF COMMITTEE (In Full) JERRY NOLTE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary **GERALD NOLTE** General Mailing Address Other (specify) \blacktriangledown PO BOX 10703 City State ZIP Code MO 64188 **GLADSTONE** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 1500.00 0.00 1500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D16^D ^M 12^M 2011 0.00 On Demand % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 1500.00 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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OF

Detailed Summary Page Transaction ID: SC/10.4235 NAME OF COMMITTEE (In Full) JERRY NOLTE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary **GERALD NOLTE** General Mailing Address Other (specify) \blacktriangledown PO BOX 10703 City State ZIP Code MO 64188 **GLADSTONE** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 12^M ^D30 2011 0.00 On Demand % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 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.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.4610 NAME OF COMMITTEE (In Full) JERRY NOLTE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Primary **GERALD NOLTE** General Mailing Address Other (specify) \blacktriangledown PO BOX 10703 City State ZIP Code MO 64188 **GLADSTONE** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 15000.00 0.00 15000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 07^M ^D24 Ž012 0.00 OD % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 15000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.4617 NAME OF COMMITTEE (In Full) JERRY NOLTE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary **GERALD NOLTE** General Mailing Address Other (specify) \blacktriangledown PO BOX 10703 City State ZIP Code MO 64188 **GLADSTONE** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 07^M Ž012 0.00 OD % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 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.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4623 NAME OF COMMITTEE (In Full) JERRY NOLTE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary **GERALD NOLTE** General Mailing Address Other (specify) \blacktriangledown PO BOX 10703 City State ZIP Code MO 64188 **GLADSTONE** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 7500.00 0.00 7500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 ^M 08^M Ž012 0.00 OD % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 7500.00 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.

Use separate schedule(s) for each category of the

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(check only one) Detailed Summary Page Transaction ID: SC/10.4706 NAME OF COMMITTEE (In Full) JERRY NOLTE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary **GERALD NOLTE** General Mailing Address Other (specify) ulletPO BOX 10703 City State ZIP Code MO 64188 **GLADSTONE** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 08^M 05 Ž012 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 TOTALS This Period (last page in this line only) 41000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.