

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

My Committee

ADDRESS (number and street)

2376 Webster Maricle Rd

Check if different
than previously
reported. (ACC)

Pitkin

LA

70656

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00936336

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

LA

04

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2026

through

M M / D D / Y Y Y Y
06 / 30 / 2026*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

Nichols, Linda, , ,

Signature of Treasurer

Nichols, Linda, , ,

Date

M M / D D / Y Y Y Y
07 / 16 / 2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

My Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	6

	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))	3000.00	3000.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	3000.00	3000.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	24802.62	24802.62
(b) Total Offsets to Operating Expenditures (from Line 14)	1525.00	1525.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	23277.62	23277.62
8. Cash on Hand at Close of Reporting Period (from Line 27)	22.38	
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)	20300.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

My Committee

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2026

To:

MM / DD / YYYY
06 / 30 / 2026**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).....

3000.00

3000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL of contributions
from individuals ▶

3000.00

3000.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

3000.00

3000.00

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

20300.00

20300.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

20300.00

20300.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

1525.00

1525.00

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)..... ▶

24825.00

24825.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	24802.62	24802.62
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	24802.62	24802.62

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	24825.00
25. SUBTOTAL (add Line 23 and Line 24).....	24825.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	24802.62
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	22.38

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 12

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

My Committee

Full Name (Last, First, Middle Initial)

ELOS Environmental LLC

Mailing Address 607 W Morris Ave

City

Hammond

State

LA

Zip Code

70403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 15 2026

Transaction ID : SA11AI.4144

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Evans, Audrey, , ,

Mailing Address 1228 Moss St

City

New Orleans

State

LA

Zip Code

70119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Unknown

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 20 2026

Transaction ID : SA11AI.4147

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Self, Juanita, , ,

Mailing Address 46465 Hwy 191

City

Florien

State

LA

Zip Code

71429

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Math Teacher

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 07 2026

Transaction ID : SA11AI.4098

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

1600.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 12

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

My Committee

Full Name (Last, First, Middle Initial)

Townsley, George, , ,

Mailing Address 744 Townsley Rd

City

DeRidder

State

LA

Zip Code

70634

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Economist

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		21		2026

Transaction ID : SA11AI.4104

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Unitemized, Aggregated, , ,

Mailing Address 2376 Webster Maricle Rd

City

Pitkin

State

LA

Zip Code

70656

FEC ID number of contributing
federal political committee.

C

Name of Employer

none

Occupation

none

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		16		2026

Transaction ID : SA11AI.4110

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Unitemized, Aggregated, , ,

Mailing Address 2376 Webster Maricle Rd

City

Pitkin

State

LA

Zip Code

70656

FEC ID number of contributing
federal political committee.

C

Name of Employer

none

Occupation

none

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2026

Transaction ID : SA11AI.4154

Amount of Each Receipt this Period

400.00

☐ Memo Item

unitemized April 1- June 30

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

1400.00

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

3000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 12

☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☐ 12	☒ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

My Committee

Full Name (Last, First, Middle Initial)

NICHOLS, MICHAEL, , ,

Mailing Address 2376 WEBSTER MARICLE ROAD

City
PITKINState
LAZip Code
70656FEC ID number of contributing
federal political committee.

C H6LA04203

Name of Employer
retiredOccupation
biologist

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 15 2026

Transaction ID : SA13A.4130

Amount of Each Receipt this Period

20300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

20300.00

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

20300.00

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 8 OF 12

☐ 11a ☐ 11b ☐ 11c ☒ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

My Committee

Full Name (Last, First, Middle Initial)

Louisiana Secretary of State

A. Mailing Address PO Box 94125

City
Baton Rouge

State
LA

Zip Code
70804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 10 2026

Transaction ID : SA14.4102

Amount of Each Receipt this Period

1525.00

☐ Memo Item

Closed primary cancellation refund

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

1525.00

1525.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 12

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

My Committee

Full Name (Last, First, Middle Initial)

A. Cenla Broadcasting

Mailing Address 1115 Texas Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2026

City
AlexandriaState
LAZip Code
71301

FEC Identification Number

C

Purpose of Disbursement
advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5112.00

Transaction ID : SB17.4126

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Cumulus Media

Mailing Address 425 Broad St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2026

City
Lake CharlesState
LAZip Code
70601

FEC Identification Number

C

Purpose of Disbursement
advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

15000.00

Transaction ID : SB17.4121

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Hacker Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2026

City
Menlo ParkState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

148.00

Transaction ID : SB17.4116

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

20260.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 12

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

My Committee

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hacker Way

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	6

City
Menlo ParkState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

650.14

Transaction ID : SB17.4118

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Headrick Outdoor Media

Mailing Address One Freedom Square

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	6

City
LaurelState
MSZip Code
39440

FEC Identification Number

C

Purpose of Disbursement
graphic design

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

750.00

Transaction ID : SB17.4123

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Headrick Outdoor Media

Mailing Address One Freedom Square

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	6

City
LaurelState
MSZip Code
39440

FEC Identification Number

C

Purpose of Disbursement
billboard

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

700.00

Transaction ID : SB17.4125

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

2100.14

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 PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 12

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

My Committee

Full Name (Last, First, Middle Initial)

A. KJAE

Mailing Address 101 Lees Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2026

City
LeesvilleState
LAZip Code
71446

FEC Identification Number

C

Purpose of Disbursement
advertising

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.4128

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Ultra Outdoor

Mailing Address 2210 Sampson St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2026

City
WestlakeState
LAZip Code
70669

FEC Identification Number

C

Purpose of Disbursement
Billboard

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1750.00

Transaction ID : SB17.4119

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

2350.00

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

24710.14

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 12 OF 12

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4130

My Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

NICHOLS, MICHAEL, , ,

Mailing Address

2376 WEBSTER MARICLE ROAD

City

PITKIN

State

LA

ZIP Code

70656

☐ Personal Funds of the Candidate

Original Amount of Loan

20300.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20300.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 15 / 2026

M M / D D / Y Y Y Y

4/15/2027

0.00 % (apr)

☐ Yes ☒ 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).....▶

20300.00

TOTALS This Period (last page in this line only).....▶

20300.00

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