

A. Form/Schedule : **F3N**

Hard copies of the Schedule C-1 and loan documents are being mailed 1/25/2011.

Transaction ID :

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Robert Aderholt for Congress

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	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)).....	21145.00	21145.00
(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)).....	21145.00	21145.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	17194.89	19568.92
(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)).....	17194.89	19568.92
8. Cash on Hand at Close of Reporting Period (from Line 27).....	46609.33	
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).....	50000.00	

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
Robert Aderholt for Congress

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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).....

5900.00

5900.00

(ii) Unitemized.....

245.00

245.00

(iii) TOTAL of contributions

6145.00

6145.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

15000.00

15000.00

(c) Other Political Committees (such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

21145.00

21145.00

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

50000.00

50000.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

50000.00

50000.00

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

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

65.33

565.33

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

71210.33

71710.33

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	17194.89	19568.92
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.....	102200.00	103200.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	119394.89	122768.92

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	94793.89
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	71210.33
25. SUBTOTAL (add Line 23 and Line 24).....	166004.22
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	119394.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	46609.33

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 23
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Robert Aderholt for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Ronald M. Cameron

Mailing Address PO Box 21440

City State Zip Code
Little Rock AR 72221-1440

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

Name of Employer Occupation
Mountaineire President

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 1 0

Transaction ID: A533330E01FB54E29B92

Amount of Each Receipt this Period
2400.00

2400.00

B. Full Name (Last, First, Middle Initial)
Mrs. Janet Holecek

Mailing Address 5201 Fairway Oaks Drive

City State Zip Code
Windermere FL 34786-8934

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

Name of Employer Occupation
None Homemaker

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 1 0

Transaction ID: ACD1B24B1A059484280D

Amount of Each Receipt this Period
2000.00

2000.00

C. Full Name (Last, First, Middle Initial)
Mr. Archibald Galloway

Mailing Address 17913 Dumfries Circle

City State Zip Code
Olney MD 20832-1662

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

Name of Employer Occupation
The Potomac Advocates Lobbyist

Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 1 0

Transaction ID: ADCBA7111CBD74F6DA20

Amount of Each Receipt this Period
500.00

500.00

SUBTOTAL of Receipts This Page (optional) ► **4900.00**

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	PAGE 7 / 23
	(check only one) <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Robert Aderholt for Congress

A.

Full Name (Last, First, Middle Initial) Mr. H. Ray Cole		Date of Receipt MM / DD / YYYY 12 / 20 / 2010
Mailing Address 2004 Rhode Island Ave		Transaction ID: AB7699942B44E459B921
City Mc Lean	State Zip Code VA 22101-4921	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Van Scoyoc Associates, Inc.	Occupation Associate VP	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) Mr. John P. Keast		Date of Receipt MM / DD / YYYY 12 / 20 / 2010
Mailing Address 300 Independence Ave SE		Transaction ID: AFEFB9441553144A2B23
City Washington	State Zip Code DC 20003-1021	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Cornerstone Government Relations	Occupation VP	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	5900.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 23
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Robert Aderholt for Congress

A. Full Name (Last, First, Middle Initial)
Branch Banking & Trust Company PAC

Mailing Address c/o Ed Simpson
PO Box 1290

City Winston-Salem State NC Zip Code 27102

FEC ID number of contributing federal political committee. **C** C00075291

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 7 / 2 0 1 0

Transaction ID: AD1CE28D3AE0847E8B59

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Locke Lord Bissell & Liddell PAC

Mailing Address Attn: Phil Rivers
401 Ninth Street NW # 400 S

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00117861

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 2 0 / 2 0 1 0

Transaction ID: A60CFDDBF63D2491185C

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
General Dynamics Voluntary P. A. C.

Mailing Address Attn: Doug Ritter
3190 Fairview Park Drive

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 2 0 / 2 0 1 0

Transaction ID: A3804A930F9654A56B0B

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 23
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Robert Aderholt for Congress

A. Full Name (Last, First, Middle Initial)
Alabama Power Co. Employees FED PAC

Mailing Address Att: Jim Miller
P. O. Box 2641

City Birmingham State AL Zip Code 35291

FEC ID number of contributing federal political committee. **C** C00077305

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 12 / 22 / 2010
Transaction ID: A64E3EA5B3EA441B28D8
 Amount of Each Receipt this Period 5000.00
 refunded 1/5/2010

B. Full Name (Last, First, Middle Initial)
ACRE

Mailing Address Attn: Chuck Penry
4301 Wilson Blvd

City Arlington State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 12 / 20 / 2010
Transaction ID: AA2656F6DAFF4424AB3F
 Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Pfizer P. A. C.

Mailing Address Att: Richard A. Passov
235 East 42nd St.

City New York State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 12 / 20 / 2010
Transaction ID: AD2B6229DE6B9445B8E4
 Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 7000.00

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

**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 10 / 23
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Robert Aderholt for Congress

A.	Full Name (Last, First, Middle Initial) EADS North America PAC		Date of Receipt MM / DD / YYYY 12 / 17 / 2010
	Mailing Address Americans for Competition in Aeros 1616 North Fort Meyer Dr. # 1600		Transaction ID: A3B4D84A94B9949168D0
	City Arlington	State VA	
	FEC ID number of contributing federal political committee. C C00421230		Amount of Each Receipt this Period 1000.00
	Name of Employer		Occupation
	Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00

B.	Full Name (Last, First, Middle Initial) Employee Of Northrop Grumman P. A. C.		Date of Receipt MM / DD / YYYY 12 / 20 / 2010
	Mailing Address 3699 Wilshire Blvd Suite 1290		Transaction ID: AFafaECD73205424ABD2
	City Los Angeles	State CA	
	FEC ID number of contributing federal political committee. C C00088591		Amount of Each Receipt this Period 1000.00
	Name of Employer		Occupation
	Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00

C.	Full Name (Last, First, Middle Initial) Dairy Farmers of America DEPAC		Date of Receipt MM / DD / YYYY 12 / 22 / 2010
	Mailing Address Att: Sam Stone 10220 N. Ambassador Drive		Transaction ID: ACD1A86C58419415AB9E
	City Kansas City	State MO	
	FEC ID number of contributing federal political committee. C C00001388		Amount of Each Receipt this Period 1000.00
	Name of Employer		Occupation
	Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00

refunded on 1/6/2011

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 11 / 23
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Robert Aderholt for Congress

A.

Full Name (Last, First, Middle Initial)
Dealers Election Action Com./NADA

Mailing Address Att: Thomas Dart
PO Box 231058

City State Zip Code
Montgomery AL 36123

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 1 7 / 2 0 1 0

Transaction ID: AE1213D9148A74B7A814

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
General Electric Political Action Committee

Mailing Address 1299 Pennsylvania Ave NW

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 1 5 / 2 0 1 0

Transaction ID: A3E812EE2BCAC458E948

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	15000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 12 / 23
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Robert Aderholt for Congress

A.

Full Name (Last, First, Middle Initial)
Traders & Farmers Bank

Mailing Address P. O. Box 550

City State Zip Code
Haleyville AL 35565

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 /

Transaction ID: A2F1B0450E73D4912A1A

Amount of Each Receipt this Period

loan

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="50000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="50000.00"/>

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)

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

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NAME OF COMMITTEE (In Full)
Robert Aderholt for Congress

A. Full Name (Last, First, Middle Initial) Federal Express Corp <hr/> Mailing Address P. O. Box 1140 <hr/> City Memphis State TN Zip Code 38101 <hr/> Purpose of Disbursement shipping Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B91413AA4258542BE878 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 1 0
	Amount of Each Disbursement this Period 316.20
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) At&t/cingular <hr/> Mailing Address 100 Concourse Prky Ste 375 <hr/> City Birmingham State AL Zip Code 35244 <hr/> Purpose of Disbursement cell phones Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B7B0FFF9522E94E73906 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 334.38
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Mrs. Pamela Cummings <hr/> Mailing Address 1715 Wyn Cliff Dr NE <hr/> City Cullman State AL Zip Code 35058-3632 <hr/> Purpose of Disbursement event planning consultant fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BD4A415F88F944F47995 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 1 0
	Amount of Each Disbursement this Period 327.75
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

978.33

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 / 23

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

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NAME OF COMMITTEE (In Full)
Robert Aderholt for Congress

A. Full Name (Last, First, Middle Initial) Holtzman Vogel, PLLC <hr/> Mailing Address 45 North Hill Drive Suite 100 <hr/> City Warrenton State VA Zip Code 20186 <hr/> Purpose of Disbursement legal services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BCD53D053429F4320BBC Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 475.00
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ms. C. Michelle Jones <hr/> Mailing Address P O Box 160 <hr/> City Double Springs State AL Zip Code 35553-0160 <hr/> Purpose of Disbursement office assistance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B755B69948C314A84A29 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ty Smith Designer Portraits <hr/> Mailing Address 414 Gunter Avenue <hr/> City Guntersville State AL Zip Code 35976 <hr/> Purpose of Disbursement Christmas Card postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BFC8CD943A6464072A2D Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 2246.64
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3221.64
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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

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NAME OF COMMITTEE (In Full)
Robert Aderholt for Congress

A. Full Name (Last, First, Middle Initial) Federal Express Corp <hr/> Mailing Address P. O. Box 1140 <hr/> City Memphis State TN Zip Code 38101 <hr/> Purpose of Disbursement shipping Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B5A307FDDCC104BDAB48 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0
	Amount of Each Disbursement this Period 32.54
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Mrs. Pamela Cummings <hr/> Mailing Address 1715 Wyn Cliff Dr NE <hr/> City Cullman State AL Zip Code 35058-3632 <hr/> Purpose of Disbursement reimb. expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BD1719DA23C9346628C4 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 1 0
	Amount of Each Disbursement this Period 480.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Citi Cards <hr/> Mailing Address PO Box 6401 <hr/> City The Lakes State NV Zip Code 88901-6406 <hr/> Purpose of Disbursement see below Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B2460414BEED3489AA1D Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 3388.35
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

3900.89

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)

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

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NAME OF COMMITTEE (In Full)
Robert Aderholt for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) United Air</p> <p>Mailing Address Customer Relations PO Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BB32A7D2FD5664E1584A</p> <p>Date of Disbursement 11 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 305.90</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) United Air</p> <p>Mailing Address Customer Relations PO Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B038EE48253BF46FBB30</p> <p>Date of Disbursement 11 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 305.90</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United Air</p> <p>Mailing Address Customer Relations PO Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B0B2014802C34416FAC4</p> <p>Date of Disbursement 11 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 305.90</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)

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

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NAME OF COMMITTEE (In Full)
Robert Aderholt for Congress

<p>A. Full Name (Last, First, Middle Initial) Hunan Dynasty Restaurant</p> <p>Mailing Address 215 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement staff food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B5E91255DCFCF40E7A80</p> <p>Date of Disbursement 11 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 202.50</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) U. S. Airways</p> <p>Mailing Address 2345 Crystal Drive</p> <p>City Arlington State VA Zip Code 22227</p> <p>Purpose of Disbursement airline fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B2926A5C112E542FBA7A</p> <p>Date of Disbursement 11 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 75.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Select Event Rentals</p> <p>Mailing Address 8610 Cherry Lane Suite 30</p> <p>City Laurel State MD Zip Code 20707</p> <p>Purpose of Disbursement thanksgiving event with Christian Embassy</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BED69FE88546B47078B3</p> <p>Date of Disbursement 11 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 192.15</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	0.00
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)

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

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NAME OF COMMITTEE (In Full)
Robert Aderholt for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Citi Cards</p> <p>Mailing Address PO Box 6401</p> <p>City The Lakes State NV Zip Code 88901-6406</p> <p>Purpose of Disbursement see below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BBDDFCCB994C24A82865</p> <p>Date of Disbursement 11 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 8596.09</p> <p>Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) U. S. Airways</p> <p>Mailing Address 2345 Crystal Drive</p> <p>City Arlington State VA Zip Code 22227</p> <p>Purpose of Disbursement airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B3C52B93BDA5C4011AFC</p> <p>Date of Disbursement 11 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 342.90</p> <p>[MEMO ITEM]</p> <p>Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) U. S. Airways</p> <p>Mailing Address 2345 Crystal Drive</p> <p>City Arlington State VA Zip Code 22227</p> <p>Purpose of Disbursement airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BED059F552B544FAFACD</p> <p>Date of Disbursement 11 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 342.90</p> <p>[MEMO ITEM]</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

8596.09

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)

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

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NAME OF COMMITTEE (In Full)
Robert Aderholt for Congress

A.

Full Name (Last, First, Middle Initial)
U. S. Airways

Mailing Address 2345 Crystal Drive

City State Zip Code
Arlington VA 22227

Purpose of Disbursement
airfare

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: BE3F0B287FB57413B9C4

Date of Disbursement

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

Amount of Each Disbursement this Period

342.90

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

16696.95

**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)

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

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NAME OF COMMITTEE (In Full)
Robert Aderholt for Congress

<p>A. Full Name (Last, First, Middle Initial) National Republican Congressional Com.</p> <p>Mailing Address 320 First Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement dues</p> <p>Candidate Name National Republican Congressional Com.</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BBDA073A4AE4540A1A92</p> <p>Date of Disbursement 12 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 100000.00</p>
<p>B. Full Name (Last, First, Middle Initial) National Republican Congressional Com.</p> <p>Mailing Address 320 First Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement dues</p> <p>Candidate Name National Republican Congressional Com.</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B2F6741D4343F40C5B84</p> <p>Date of Disbursement 12 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 2200.00</p>
<p>C. Full Name (Last, First, Middle Initial) Help America's Leaders (HALPAC)</p> <p>Mailing Address 701 8th Street NW Suite 500</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement in-kind food for event held 10/12/2010 on Citi Card payment 11/24/2010</p> <p>Candidate Name Help America's Leaders (HALPAC)</p> <p>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) ▼</p> <p>State: District:</p>	<p>Transaction ID: B7872A90668F34341847</p> <p>Date of Disbursement 10 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 3391.15</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ► 102200.00

TOTAL This Period (last page this line number only) ► 102200.00

SCHEDULE C (FEC Form 3)

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

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

LOANS

NAME OF COMMITTEE (In Full)
Robert Aderholt for Congress

Transaction ID: C2F1B0450E73D4912A1A

LOAN SOURCE Full Name (Last, First, Middle Initial) Traders & Farmers Bank		Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P. O. Box 550		
City Haleyville	State AL	ZIP Code 35565

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 1 2 D D 0 6 Y Y Y Y 2 0 1 0	20110105	499.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
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) ▶	<input type="text" value="50000.00"/>
TOTALS This Period (last page in this line only) ▶	<input type="text" value="50000.00"/>

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-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Federal Election Commission, Washington, D.C. 20463

Supplementary for
Information found on
Page 23 / 23 of Schedule C

Name of Committee (in Full) Robert Aderholt for Congress		FEC IDENTIFICATION NUMBER C00313247	
Back Ref ID: C2F1B0450E73D4912A1A			
LENDING INSTITUTION (LENDER) Full Name Traders & Farmers Bank		Amount of Loan 50000.00	Interest Rate (APR) 499.00 %
Mailing Address P. O. Box 550		Date Incurred or Established 12 06 2010	
City Haleyville	State AL	Zip Code 35565	Date Due 20110105
A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred : _____			
B. If line of credit, Amount of this Draw: _____		Total Outstanding balance : _____	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the value of this collateral? _____ Does the lender have a perfected security interest in it? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? _____	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Date account established: _____		Location of account Address: City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Jeff Mobley Signature _____		DATE 01 25 2011	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Sharon Harris Signature _____		DATE 01 25 2011	
		Title VP	