

**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

HAMPTON HARRIS FOR CONGRESS

ADDRESS (number and street)

PO BOX 249

Check if different
than previously
reported. (ACC)

LOWNDESBORO

AL

36752-0249

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00934398

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

AL

02

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
08 / 04 / 2026in the
State of

AL

(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
07 / 01 / 2026

through

M M / D D / Y Y Y Y
07 / 22 / 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

HARRIS, HAMPTON, , ,

Signature of Treasurer

HARRIS, HAMPTON, , ,

Date

M M / D D / Y Y Y Y
07 / 30 / 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

HAMPTON HARRIS FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		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))....	7184.48	43126.30
(b) Total Contribution Refunds (from Line 20(d))	0.00	1.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	7184.48	43125.30
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	62986.97	84828.16
(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))	62986.97	84828.16
8. Cash on Hand at Close of Reporting Period (from Line 27).....	163307.14	
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)	266000.56	

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

HAMPTON HARRIS FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2026

To:

MM / DD / YYYY
07 / 22 / 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).....

6208.20

32361.91

(ii) Unitemized

976.28

6378.39

(iii) TOTAL of contributions
from individuals ▶

7184.48

38740.30

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

1250.00

(d) The Candidate

0.00

3136.00

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

7184.48

43126.30

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

205510.00

(b) All Other Loans.....

0.00

0.00

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

0.00

205510.00

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

0.00

0.00

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)..... ▶

7184.48

248636.30

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.....	62986.97	84828.16
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	1.00
(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	1.00
21. OTHER DISBURSEMENTS	0.00	500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	62986.97	85329.16

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	219109.63
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	7184.48
25. SUBTOTAL (add Line 23 and Line 24).....	226294.11
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	62986.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	163307.14

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 23

☒ 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)

HAMPTON HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHAPMAN, LEWIS, , ,

A.

Mailing Address 1550 E TRINITY BLVD

City
MONTGOMERYState
ALZip Code
36106-2806FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

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
07 22 2026

Transaction ID : AA157A56D789A421CB3E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

EVERAGE, DANA, , ,

B.

Mailing Address PO BOX 640185

City
PIKE ROADState
ALZip Code
36064FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

482.78

Date of Receipt

M M / D D / Y Y Y Y Y
07 22 2026

Transaction ID : AD5E6AF498C9B459B85F

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FRY, LINDY, , ,

C.

Mailing Address 5759 COUNTY ROAD 708

City
ENTERPRISEState
ALZip Code
36330-6286FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

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
07 22 2026

Transaction ID : A0CE92579B06D4511B90

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

1800.00

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

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

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

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NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

HOLDING, BRUCE, , ,

A. Mailing Address 2830 PARMENTER STCity
MIDDLETONState
WIZip Code
53562-1726FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	6	

Transaction ID : AFCD317D064FA4E2B80C

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PARMA, VICTORIA, , ,

B. Mailing Address 7724 LAKERIDGE DRCity
MONTGOMERYState
ALZip Code
36117-7454FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	6	

Transaction ID : A45C40DE855F441788E7

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PRICKETT, FAY, , ,

C. Mailing Address 510 GOUDE LNCity
CECILState
ALZip Code
36013-3630FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

675.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	6	

Transaction ID : AB6701362A8F843C982B

Amount of Each Receipt this Period

100.00

☐ Memo Item

1100.00

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

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

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

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NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

PRICKETT, LORENZO, , ,

A.

Mailing Address 510 GOUDE LN

City

CECIL

State

AL

Zip Code

36013-3630

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	6	

Transaction ID : A4B7D1EEBCC7144FA819

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RALEY, BILLY, , , JR.

B.

Mailing Address 451 COURTNEY DR

City

MONTGOMERY

State

AL

Zip Code

36109-4607

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	6	

Transaction ID : AB392FD85D4CF4EA5A4C

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SCHMITZ, MICHAEL, , ,

C.

Mailing Address 3202 BROOKSIDE DR

City

DOTHAN

State

AL

Zip Code

36303-2050

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	6	

Transaction ID : A53C239DF820440858D0

Amount of Each Receipt this Period

2000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

2600.00

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

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

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NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

SHELTON, MICHAEL, , ,

A.

Mailing Address 17800 REMINGTON DR

City

ATHENS

State

AL

Zip Code

35611-4643

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 22 2026

Transaction ID : A632F762764814D079AE

Amount of Each Receipt this Period

300.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

TAYLOR, ALYSSA, , ,

Mailing Address 118 FOREST GLEN DR

City

PIKE ROAD

State

AL

Zip Code

36064

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y
07 21 2026

Transaction ID : A7A057F2D45424A15802

Amount of Each Receipt this Period

208.20

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City

ARLINGTON

State

VA

Zip Code

22203-1665

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

5681.87

Date of Receipt

M M / D D / Y Y Y Y Y
07 21 2026

Transaction ID : ABD5B1A67D63240A0ABC

Amount of Each Receipt this Period

208.20

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

508.20

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 9 OF 23

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

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NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

WHITT, SHARON, , ,

A.

Mailing Address 480 TOWNE LAKE PL

City

MONTGOMERY

State

AL

Zip Code

36117

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

1382.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 22 2026

Transaction ID : AD5D25C85252A4D90998

Amount of Each Receipt this Period

200.00

☐ 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
☐ Other (specify) ▼

☐ General

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
☐ Other (specify) ▼

☐ General

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)..... ▶

200.00

6208.20

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 23

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CALLAHAN, GREG, , ,

Mailing Address PO BOX 249

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	2	6

City
LOWNDESBOROState
ALZip Code
36752-0249

FEC Identification Number

C

Purpose of Disbursement
SIGN PRINTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

585.00

Transaction ID : BF323B01690B94B74AC4

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. CALLAHAN, GREG, , ,

Mailing Address PO BOX 249

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	2	6

City
LOWNDESBOROState
ALZip Code
36752-0249

FEC Identification Number

C

Purpose of Disbursement
SIGN PRINTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2007.20

Transaction ID : B149DEC12CA064177AB9

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. DAVIS DIRECT

Mailing Address 1241 NEWELL PKWY

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	6

City
MONTGOMERYState
ALZip Code
36110-3212

FEC Identification Number

C

Purpose of Disbursement
PRINTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

315.70

Transaction ID : BDB4310E32C8442E59CF

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

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

2907.90

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)

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

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NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DUKES, DYLAN, , ,

Mailing Address PO BOX 249

City
LOWNDESBOROState
ALZip Code
36752-0249Purpose of Disbursement
CAMPAIGN CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2293.43

Transaction ID : B7B4D86D848A74840939

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NUMINAR ANALYTICAL

Mailing Address 1201 WILSON BLVD

City
ARLINGTONState
VAZip Code
22209-2300Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1170.87

Transaction ID : BE300B277E10443C7A64

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SIGNAL CREST STRATGIES LLC

Mailing Address 30 N GOULD STREET STE R

City
SHERIDANState
WYZip Code
82801-6317Purpose of Disbursement
DIRECT MAIL

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

20271.89

Transaction ID : BFC3815AF31D14321866

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

23736.19

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 12 OF 23

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SIGNAL CREST STRATGIES LLC

Mailing Address 30 N GOULD STREET STE R

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2026

City
SHERIDANState
WYZip Code
82801-6317

FEC Identification Number

C

Purpose of Disbursement
DIRECT MAIL

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

35825.70

Transaction ID : B43A640376FBF4D4B866

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICESMailing Address 4250 FAIRFAX DR
STE 600

Date of Disbursement

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

City
ARLINGTONState
VAZip Code
22203-1665

FEC Identification Number

C

Purpose of Disbursement
CREDIT CARD FEES

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

9.23

Transaction ID : BEECABDFCDE2343C9B03

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICESMailing Address 4250 FAIRFAX DR
STE 600

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2026

City
ARLINGTONState
VAZip Code
22203-1665

FEC Identification Number

C

Purpose of Disbursement
CREDIT CARD FEES

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

10.25

Transaction ID : B43BED27551604411A3F

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

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

35845.18

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

62489.27

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

PAGE 13 OF 23

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

NAME OF COMMITTEE (In Full)

Transaction ID : CEF2F02B92AAD4A25B40

HAMPTON HARRIS FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

HARRIS, HAMPTON, , ,

Mailing Address

P.O. BOX 249

City

LOWNDESBORO

State

AL

ZIP Code

36752-0249

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 29 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

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).....▶

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.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 14 OF 23

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C9D7C89C789114BECB05

HAMPTON HARRIS FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

HARRIS, HAMPTON, , ,

Mailing Address

P.O. BOX 249

City

LOWNDESBORO

State

AL

ZIP Code

36752-0249

☒ Personal Funds of the Candidate

Original Amount of Loan

200000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 19 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

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).....▶

200000.00

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

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

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

PAGE 15 OF 23

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

NAME OF COMMITTEE (In Full)

Transaction ID : C2DC83B9301724BE6845

HAMPTON HARRIS FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

HARRIS, HAMPTON, , ,

Mailing Address

P.O. BOX 249

City

LOWNDESBORO

State

AL

ZIP Code

36752-0249

☒ Personal Funds of the Candidate

Original Amount of Loan

510.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

510.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 14 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

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).....▶

510.00

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

205510.00

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 16 OF 23

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

MILEAGE, DATA AND FILING FEES

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

13669.45

Transaction ID : DB21AD8A79A344ABCA51

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13669.45

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

MILEAGE

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

2553.45

Transaction ID : DD7290CF2EE88432D8A0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2553.45

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

DONATION

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

176.65

Transaction ID : D0754914B1FE246729D5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

176.65

1) **SUBTOTALS** This Period This Page (optional)

16399.55

2) **TOTALS** This Period (last page this line number only) 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 23

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

WORDPRESS

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

35.00

Transaction ID : D6C3870F16BE74892ADE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

35.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

DONATION

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

50.00

Transaction ID : D6AAE7CAC84A84A5ABA5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

STRATEGIC CONSULTING

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

1362.00

Transaction ID : D96996C073B634C09B6D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1362.00

1) **SUBTOTALS** This Period This Page (optional)

1447.00

2) **TOTALS** This Period (last page this line number only)

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 18 OF 23

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

CANDIDATE FORUM

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

32.80

Transaction ID : DF00DC03602FF45DAA52

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

32.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

ONLINE SERVICES

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

400.50

Transaction ID : DA361739D74F74E2CBD9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

WORDPRESS

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

66.40

Transaction ID : DDB05EEB927EF4D62A90

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

66.40

1) **SUBTOTALS** This Period This Page (optional)

499.70

2) **TOTALS** This Period (last page this line number only)

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 19 OF 23

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

ONLINE SERVICES

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

3395.97

Transaction ID : DBF45C80DDAB44220B0A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3395.97

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

TREY TAYLOR

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

5000.00

Transaction ID : D8394F11C2C954AB9A7A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

WIRE FEE

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

25.00

Transaction ID : D104F3A5D64B3451CA18

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25.00

1) **SUBTOTALS** This Period This Page (optional)

8420.97

2) **TOTALS** This Period (last page this line number only) 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 20 OF 23

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

WORDPRESS

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

204.00

Transaction ID : D7224EFC95EA04D158A3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

204.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

REGIONS

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

510.00

Transaction ID : DEB4CA29E77934B6CAA6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

510.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

CREDIT CARD EXPENSES

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

6657.67

Transaction ID : D23935A4719244CF5BC0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6657.67

1) **SUBTOTALS** This Period This Page (optional)

7371.67

2) **TOTALS** This Period (last page this line number only) 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 21 OF 23

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

META

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

48.06

Transaction ID : DC1A5FCA5AA364246AA5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

48.06

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

HYATT HOTEL

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

194.83

Transaction ID : D42FED78D360E4596933

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

194.83

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

META

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

18.33

Transaction ID : DED919336916E42648FA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.33

1) **SUBTOTALS** This Period This Page (optional)

261.22

2) **TOTALS** This Period (last page this line number only)

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 22 OF 23

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

DONATION

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

3480.00

Transaction ID : D926B268F376A4A6297D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3480.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

ONLINE SERVICES

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

1926.28

Transaction ID : D8D82C04ADE964AE1BEE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1926.28

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

CREDIT CARD EXPENSES

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

8552.72

Transaction ID : D72F357DD06C740FEAC8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8552.72

1) **SUBTOTALS** This Period This Page (optional)

13959.00

2) **TOTALS** This Period (last page this line number only) 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 23 OF 23

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

CREDIT CARD EXPENSES

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

7131.45

Transaction ID : DF8E695FE889241ADA0C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7131.45

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

TREY TAYLOR

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

5000.00

Transaction ID : DF09E0244346844F2ABA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

12131.45

2) **TOTALS** This Period (last page this line number only)

60490.56

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

205510.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

266000.56