PAGE 1 / 14

#### FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An	Authorized Com	nmittee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN		kample: If typing, wer the lines.	type 12FE4M	
Cooper for Congre	ess				
ADDDECC (south to and atte	P.O. Box 6803	372			
ADDRESS (number and stre	eet)				
Check if different than previously	rt Franklin			TN	37068
reported. (ACC)					
2. FEC IDENTIFICATION	ON NUMBER ▼	CITY ▲		STATE ▲	ZIP CODE ▲
					STATE ▼ DISTRICT
C C00912378		3. IS THIS REPORT	NEW (N)	OR AMENI	DED TN 07
		1			
4. TYPE OF REPOR		(b) 12-Day <b>PRE</b>	E-Election Report	for the:	
(a) Quarterly Report	is:	П	Primary (12P)	General (	12G) Runoff (12R)
April 15 Qua	arterly Report (Q1)	i i			
July 15 Qua	rterly Report (Q2)		Convention (120	C) Special (*	12S)
October 15	Quarterly Report (Q3)	Election on		D D / Y Y Y Y	in the State of
January 31	Year-End Report (YE)	(c) 30-Day <b>POS</b>	ST-Election Report	for the:	
			General (30G)	Runoff (3	OR) Special (30S)
X Termination	Report (TER)	Election on		D D / Y Y Y Y	in the State of
5. Covering Period	M M / D 01	/ Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	through	M M / D D /	Y Y Y Y Y 2025
I certify that I have exami	ined this Report and t	o the best of my k	nowledge and beli	ief it is true, correct an	d complete.
Type or Print Name of Tre	easurer Brewer, Troy	у, , ,			
Signature of Treasurer	Brewer, Troy, , ,			Date Date	/ D D / Y Y Y Y Y 2025
NOTE: Submission of false,	, erroneous, or incompl	ete information may	subject the person	signing this Report to t	he 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

		or Type Committee Name oper for Congress		
R	epor	t Covering the Period: From:	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M 10 M / 31 D / Y 2025 Y
			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		•
	(a)	Total Contributions (other than loans) (from Line 11(e))	0.00	28656.58
	(b)	Total Contribution Refunds (from Line 20(d))	1500.00	1500.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	- 1500.00	27156.58
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	4857.28	25573.54
	(b)	Total Offsets to Operating Expenditures (from Line 14)	48.00	4000.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	4809.28	21573.54
8.		sh on Hand at Close of porting Period (from Line 27)	0.00	
9.	the	ots and Obligations Owed <b>TO</b> Committee (Itemize all on nedule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed <b>BY</b> Committee (Itemize all on nedule C and/or Schedule D)	2445.06	

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

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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

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

Write or Type Committee Name Cooper for Congress 31 2025 10 01 2025 10 Report Covering the Period: From: To: I. RECEIPTS **COLUMN A COLUMN B COLUMN C Total this Period Election Cycle Total as of** Total for 2025 80 2025 (date after general election) (date of general election) through 11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than 10 31 2025 Political Committees (last day of reporting period) Itemized (use Schedule A) 0.00 26505.73 0.00 (ii) Unitemized 0.00 2150.85 0.00 (iii) Total of contributions from individuals 0.00 28656.58 0.00 Political Party Committees 0.00 0.00 0.00 Other Political Committees 0.00 0.00 0.00

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C  Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
	(d) The Candidate		
	0.00	0.00	0.00
	(e) TOTAL CONTRIBUTIONS (other than loa	ns) (add Lines 11(a)(iii), (b), (c) and (d))	
	0.00	28656.58	0.00
12.	TRANSFERS FROM OTHER AUTHORIZED C	COMMITTEES	
	0.00	0.00	0.00
13.	LOANS: (a) Made or Guaranteed by the Candidate		
	449.61	1795.45	449.61
	(b) All Other Loans		
	0.00	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))		
	449.61	1795.45	449.61
14.	OFFSETS TO OPERATING EXPENDITURES	(Refunds, rebates, etc.)	
	48.00	4000.00	48.00
15.	OTHER RECEIPTS (Dividends, Interest, etc.)		
	0.21	0.68	0.00
16.	TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 a	and 15)	
	497.82	34452.71	497.61

Report of Receipts and Disbursements FEC Form 3 (Revised 1/01) Write or Type Committee Name Cooper for Congress 10 01 2025 31 2025 Report Covering the Period: From: To: **II. DISBURSEMENTS COLUMN A COLUMN B COLUMN C Total this Period** Election Cycle Total as of \* Total for \* (date after general election) (date of general election) through \* (last day of reporting period) (\* See page 5 for date) (\* See page 5 for dates) 17. OPERATING EXPENDITURES 4163.77 25573.54 4857.28 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES 2800.00 0.00 0.00 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate 0.00 0.00 0.00 (b) Of All Other Loans 0.00 0.00 0.00 (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b)) 0.00 0.00 0.00 REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees 1500.00 1500.00 0.00 (b) Political Party Committees 0.00 0.00 0.00

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C  Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)		
	(c) Other Political Committees (such as PACs	5)			
	0.00	0.00	0.00		
	(d) TOTAL CONTRIBUTION REFUNDS (add	Lines 20(a), (b) and (c))			
	1500.00	1500.00	0.00		
21.	OTHER DISBURSEMENTS				
	0.00	90.00	0.00		
22.	TOTAL DISBURSEMENTS (add Lines 17, 18,	19(c), 20(d) and 21)			
	6357.28	29963.54	4163.77		
	(Note: Substitute in lieu of Line #6 o	f Summary Page for this report only; subtra	act Line 20(d) from Line 11(e)) 0.00		
	IV. NET OPERATING EXPENDITURES	S			
	(Note: Substitute in lieu of Line #7	of Summary Page for this report only; sub	otract Line 14 from Line 17)		
	4809.28	21573.54	4115.77		
	V. CASH SUM	MARY			
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	5859.46		
24.	TOTAL RECIEPTS THIS PERIOD (from Line	16)	497.82		
25.	SUBTOTAL (add Line 23 and Line 24)		6357.28		
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	6357.28		
27.	CASH ON HAND AT CLOSE OF REPORTING	PERIOD (subtract Line 26 from Line 25)	0.00		

### S

			FOR LINE NUMBER: PAGE 7 OF 14 (check only one)  11a 11b 11c 11d 11d 12 X 13a 13b 14 15  person for the purpose of soliciting contributions
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Cooper for Congress	e name and	address of any political committe	ee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Cooper, Stuart, , ,  Mailing Address P.O. Box 680372  City	State	Zip Code	Date of Receipt  10 20 2025  Transaction ID: SA13A.4568
Franklin  FEC ID number of contributing federal political committee.	<u> </u>	37068 TN07278	Amount of Each Receipt this Period  449.61
Name of Employer Flagler Technologies  Receipt For: 2025  Primary General  Other (specify) ▼  Special-Primary		Market Expansion Sales Leade ycle-to-Date  449.61	Memo Item Loan from Candidate
Full Name (Last, First, Middle Initial)  3.   Mailing Address  City	State	Zip Code	Date of Receipt
FEC ID number of contributing federal political committee.  Name of Employer	C	1	Amount of Each Receipt this Period
Receipt For:  Primary General  Other (specify) ▼		ycle-to-Date ₩	Memo Item
Full Name (Last, First, Middle Initial)  C. Mailing Address  City	State	Zip Code	Date of Receipt
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer  Receipt For:  Primary General  Other (specify) ▼	Occupation  Election C	ycle-to-Date	Memo Item
SUBTOTAL of Receipts This Page (optional)			449.61

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

449.61

#### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

**PAGE** 8 14 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 19b 18 19a Detailed Summary Page 20a 20b 20c 21 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) Cooper for Congress Full Name (Last, First, Middle Initial) Date of Disbursement Cision 2025 10 Mailing Address 300 S Riverside Plaza Ste 300 State City Zip Code **FEC Identification Number** IL Chicago 60606 Purpose of Disbursement **Dues and Subscriptions** Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2025 289.71 Office Sought: House Senate Primary General Transaction ID: SB17.4565 Other (specify) President Memo Item Special-Primary District: State: Full Name (Last, First, Middle Initial) Date of Disbursement **B.** Cision Mailing Address 300 S Riverside Plaza 08 2025 10 Ste 300 City State Zip Code **FEC Identification Number** Chicago 60606 Purpose of Disbursement **Dues and Subscriptions** Candidate Name Amount of Each Disbursement this Period Category/ Type 2607.38 Disbursement For: 2025 Office Sought: House Senate Primary General Transaction ID: SB17.4569 Other (specify) President Memo Item State: District: Special-Primary Full Name (Last, First, Middle Initial) Date of Disbursement C. Green, Gary, , , Mailing Address 10979 Apison Pike 10 08 2025 City State Zip Code **FEC Identification Number** Apison TN 37302 Purpose of Disbursement Political/Admin Consulting Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2025 1000.00 Office Sought: House Senate Primary General Transaction ID: SB17.4570 President Other (specify) Memo Item State: District: Special-Primary SUBTOTAL of Disbursements This Page (optional)..... 3897.09

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

#### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 9 OF 14 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17

		Detailed Summa	ry Page	20a 20b 20c 21
Any information copied from such Reports and Star or for commercial purposes, other than using the n				son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		7,11	-	
Cooper for Congress				
Full Name (Last, First, Middle Initial)				
Political Financial Management L	LC			Date of Disbursement
Mailing Address 95 White Bridge Rd Ste 207				10 23 2025
City	State TN	Zip Code		FEC Identification Number
Nashville Purpose of Disbursement Compliance/Accounting	TIN	37205		C
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburs	ement For:	2025		510.58
Senate	Primary	General		Transaction ID : SB17.4580
President	Other (sp		rimor.	Memo Item
State: District: Full Name (Last, First, Middle Initial)		Special-P	ппагу	_
3. Wells, David, , ,				Date of Disbursement
Mailing Address 212 Campus Ln				10 01 / Y Y Y Y Y Y Y
City	State	Zip Code		FEC Identification Number
Knoxville	TN	37918		
Purpose of Disbursement Website Expense				C
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought:  House Senate President State: Disburs	ement For: Primary Other (sp	2025 General ecify) ▼ Special-P	rimany	325.00  Transaction ID : SB17.4574  Memo Item
Full Name (Last, First, Middle Initial)		Эресіаі-г	illiary	
C.				Date of Disbursement
Mailing Address				M M / D D / Y Y Y
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement				C
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburs Senate	ement For: Primary	General		
President State: District:	Other (sp	ecify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional	l)			835.58
TOTAL This Period (last page this line number or	ıly)			4732.67

### SCHEDULE B (FEC Form 3)

**PAGE** 10 14 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the ITEMIZED DISBURSEMENTS 17 18 19b 19a Detailed Summary Page **X** 20a 20b 20c 21 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) Cooper for Congress Full Name (Last, First, Middle Initial) Date of Disbursement A. Varnedoe, Howard, , , 2025 10 Mailing Address 3076 Butler Rd State City Zip Code **FEC Identification Number** TN Columbia 38401 Purpose of Disbursement Refund of Contribution Candidate Name Amount of Each Disbursement this Period Category/ Type 1500.00 Disbursement For: 2025 Office Sought: House Senate Primary General Transaction ID: SB20A.4564 Other (specify) President Memo Item Special-General State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1500.00

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

1500.00

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

FOR LINE NUMBER: (check only one)

PAGE 11

13a

OF

		100
NAME OF COMMITTEE (In Full)  Cooper for Congress		Transaction ID : SC/10.4101
,	dalla laitial\	Floriton
LOAN SOURCE Full Name (Last, First, Mic Cooper, Stuart, , ,	idie initial)	☐ Memo Item
Mailing Address P.O. Box 680372		Other (specify) ▼ Special-Primary
City	State	ZIP Code
Franklin	TN	37068 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date  Balance Outstanding at Close of This Period
200.00		0.00
TERMS Date Incurred	С	ate Due Interest Rate Secured: (If none, enter 0)
07 / 17 / Y Y Y Y Y Y	M M / D D	/ 01/31/2040
List All Endorsers or Guarantors (if any) t	o Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
	T	Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	T	Amount Guaranteed
City	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	T===	Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional).		200.00
		, , , , , , , , , , , , , , , , , , , ,
TOTALS This Period (last page in this line only	/) ·····	······································
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE 12 OF

X	13a
	13b

			Detailed 3	Summary P	rage			13b
AME OF COMMITTEE (In Full)		,		Trans	action ID	: SC/10.4292		•
Cooper for Congress								
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)			Memo Ite	m Elect	ion: 2025		
Cooper, Stuart, , ,						Primary General		
Mailing Address					_	Other (specify)	▼	
P.O. Box 680372					Spe	cial-Primary		
City	State	ZIP Code	<b>)</b>					
Franklin	TN	37068				Personal Fund	is of the Car	ndidate
Original Amount of Loan	Cumulative Pay	yment To D	ate	В	alance O	utstanding at C	lose of This	Period
1456.06			0.00				1456.06	6
	,	, 5				7		
TERMS Date Incurred		ate Due		Interest Ra (If none, en			Secured:	
08 / 31 / Y Y Y Y Y Y Y	M M / D D	01/3	1/2045		0.00	% (apr)	Yes	X No
List All Endorsers or Guarantors (if any) t	o Loan Source							
1. Full Name (Last, First, Middle Initial)		ı	Name of Em	ployer				
Mailing Address		(	Occupation					
		<b>I</b>	Amount					
City State	ZIP Code	<b>I</b>	Guaranteed Outstanding:		7	7		
2. Full Name (Last, First, Middle Initial)		1	Name of Em	ployer				
Mailing Address		(	Occupation					
			Amount					
City	ZIP Code		Guaranteed Outstanding:		-	7		
3. Full Name (Last, First, Middle Initial)		1	Name of Em	ployer				
Mailing Address		(	Occupation					
			Amount					
City	ZIP Code		Guaranteed Outstanding:			7		
4. Full Name (Last, First, Middle Initial)		1	Name of Em	ployer				
Mailing Address		(	Occupation					
			Amount	-				
City State	ZIP Code		Guaranteed Outstanding:		7	7	-	
SUBTOTALS This Period This Page (optional)				▶		7	1456.06	6
FOTALS This Period (last page in this line only	/)			▶		, ,		
Carry outstanding balance only to LINE 3, Sch	nedule D. for this	s line. If no	Schedule	D. carry fo	rward to	appropriate	line of Sum	marv.
,				,		· · · · · · · · · · · ·		· J ·

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

FOR LINE NUMBER: (check only one)

PAGE 13

13a

OF

			Detailed Garrinar	y rage	13b
NAME OF COMMITTEE (In Full)			Tra	ansaction ID : SC/10.4559	
Cooper for Congress					
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		☐ Memo		
Cooper, Stuart, , ,				Primary  General	
Mailing Address				Other (specify) ▼	
P.O. Box 680372				Special-Primary	
City	State	ZIP Code	e	N Barranal Fredhad the	D = 1" -1 = 1 =
Franklin	TN	37068		Personal Funds of the (	Jandidate
Original Amount of Loan	Cumulative Pay	yment To D	ate	Balance Outstanding at Close of T	his Period
339.39			0.00	339	9.39
7 7	,	9		3 3	
TERMS Date Incurred		Date Due	Interest (If none,	Rate Secured enter 0)	:
M M / D D / Y Y Y Y Y 300 2025	M M / D D	/ Y 01/3	31/2045 Y	0.00 % (apr) Yes	$X_{No}$
List All Endorsers or Guarantors (if any) t	o Loon Source			70 (арі)	
Full Name (Last, First, Middle Initial)	o Loan Source		Name of Employer		
, , , , , , , , , , , , , , , , , , , ,					
Mailing Address		'	Occupation		
			Amount		_
City	ZIP Code		Guaranteed Outstanding:	7	
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Maritim or Andrews			Occupation		
Mailing Address		'	Оссираціон		
			Amount Guaranteed		
City	ZIP Code		Outstanding:	7 7 7	_
3. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address			Occupation		
Walling / Iddioss					
City State	ZIP Code		Amount Guaranteed		7
City	ZIP Code		Outstanding:	7 7 7 7	_
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed		7
Giale	2.11 0000	'	Outstanding:		_
SUBTOTALS This Period This Page (optional).			······	339	.39
TOTALS This Period (last page in this line only	Λ)				一
To me of the fact page in the only	· · · · · · · · · · · · · · · · · · ·				
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	s line. If no	Schedule D, carry	forward to appropriate line of Su	ımmary.

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

FOR LINE NUMBER: (check only one)

PAGE 14

13a

			Detailed Guillina	y rage	13b
NAME OF COMMITTEE (In Full)			Tra	ansaction ID : SC/10.4568	
Cooper for Congress					
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		Memo		
Cooper, Stuart, , ,				Primary General	
Mailing Address				Other (specify)	
P.O. Box 680372				Special-Primary	
City	State	ZIP Code	<del>,</del>		
Franklin	TN	37068		Personal Funds of the C	andidate
Original Amount of Loan	Cumulative Pay	yment To D	ate	Balance Outstanding at Close of Th	nis Period
449.61			0.00	449	.61
7 7	9	9		, ,	
TERMS Date Incurred		Date Due	Interest (If none,	t Rate Secured: , enter 0)	
10 20 / Y Y Y Y Y Y Y	M M / D D	/ Y01/3	31/2045 Y	0.00 % (apr) Yes	X No
List All Endorsers or Guarantors (if any) t	o Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		(	Occupation		
		<u> </u>	Amount		
City	ZIP Code		Guaranteed Outstanding:	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
2. Full Name (Last, First, Middle Initial)	1	1	Name of Employer		
Mailing Address		(	Occupation		
		H	Amount		
City State	ZIP Code		Guaranteed		
O. Full Name (Last First Middle Initial)			Outstanding:	, , , , -	
3. Full Name (Last, First, Middle Initial)		'	Name of Employer		
Mailing Address		(	Occupation		
			Amount Guaranteed		7
City	ZIP Code		Outstanding:	y y	_
4. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(	Occupation		
		<u> </u>	Amount		
City State	ZIP Code		Guaranteed Outstanding:	y y	
SUBTOTALS This Period This Page (optional)			······	449.	61
TOTALS This Period (last page in this line only	/)			2445.	06
Carry outstanding balance only to LINE 3, Sc	nedule D. for this	s line. If no	Schedule D. carn	v forward to appropriate line of Su	mmary
July Cutatanung Dalance Unit to Line 3. 30	ICAUIC D, IOI UIK	o miro. II IIC	, John Gudie Di Cally	, ivitalia la appiopilale ille Ul Jul	y.