



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**Cooper for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2025 To: M M / D D / Y Y Y Y 10 / 31 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(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
<b>7. Net Operating Expenditures</b>		
(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
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>		
	0.00	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>		
	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>		
	2445.06	

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).**

POST-ELECTION DETAILED SUMMARY PAGE

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

Report Covering the Period: From: 10 / 01 / 2025 To: 10 / 31 / 2025

I. RECEIPTS

COLUMN A
Total this Period

COLUMN B
Election Cycle Total as of

COLUMN C
Total for

10 / 07 / 2025
(date of general election)

10 / 08 / 2025
(date after general election)

through

10 / 31 / 2025
(last day of reporting period)

11. CONTRIBUTIONS

(other than loans) FROM:

- (a) Individuals/Persons Other than Political Committees
(i) 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

(b) Political Party Committees

0.00 0.00 0.00

(c) Other Political Committees

0.00 0.00 0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

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 loans) (add Lines 11(a)(iii), (b), (c) and (d))		
0.00	28656.58	0.00
12. TRANSFERS FROM OTHER AUTHORIZED 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 and 15)		
497.82	34452.71	497.61

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

Cooper for Congress

Report Covering the Period: From:

MM / DD / YYYY  
10 / 01 / 2025

To:

MM / DD / YYYY  
10 / 31 / 2025**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>17. OPERATING EXPENDITURES</b>		
4857.28	25573.54	4163.77
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	2800.00	0.00
<b>19. LOAN REPAYMENTS:</b>		
(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
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
1500.00	1500.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

## POST-ELECTION DETAILED SUMMARY PAGE

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)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

1500.00	1500.00	0.00
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21. OTHER DISBURSEMENTS

0.00	90.00	0.00
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

6357.28	29963.54	4163.77
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### III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

- 1500.00	27156.58	0.00
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### IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

4809.28	21573.54	4115.77
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### V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING 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 Line 22).....	6357.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	0.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 14  
(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)  
**Cooper for Congress**

A. Full Name (Last, First, Middle Initial)  
Cooper, Stuart, , ,

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 20 / 2025

Transaction ID : SA13A.4568

Mailing Address P.O. Box 680372  
City: Franklin State: TN Zip Code: 37068

Amount of Each Receipt this Period  
449.61

FEC ID number of contributing federal political committee.  
C H6TN07278

Name of Employer: Flagler Technologies Occupation: Southeast Market Expansion Sales Leade

Memo Item  
 Loan from Candidate

Receipt For: 2025  
 Primary  General  
 Other (specify) ▼  
Special-Primary  
Election Cycle-to-Date ▼  
449.61

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

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Mailing Address  
City State Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.  
C

Name of Employer Occupation

Memo Item

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

C. Full Name (Last, First, Middle Initial)

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Mailing Address  
City State Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.  
C

Name of Employer Occupation

Memo Item

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	449.61
<b>TOTAL</b> This Period (last page this line number only).....▶	449.61

# 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 8 OF 14	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cooper for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cision</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2025
Mailing Address 300 S Riverside Plaza Ste 300		FEC Identification Number C
City Chicago	State IL	Zip Code 60606
Purpose of Disbursement Dues and Subscriptions		Amount of Each Disbursement this Period 289.71
Candidate Name		Transaction ID : SB17.4565
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2025 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Special-Primary	

Full Name (Last, First, Middle Initial) <b>B. Cision</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2025
Mailing Address 300 S Riverside Plaza Ste 300		FEC Identification Number C
City Chicago	State IL	Zip Code 60606
Purpose of Disbursement Dues and Subscriptions		Amount of Each Disbursement this Period 2607.38
Candidate Name		Transaction ID : SB17.4569
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2025 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Special-Primary	

Full Name (Last, First, Middle Initial) <b>C. Green, Gary, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2025
Mailing Address 10979 Apison Pike		FEC Identification Number C
City Apison	State TN	Zip Code 37302
Purpose of Disbursement Political/Admin Consulting		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : SB17.4570
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2025 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Special-Primary	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3897.09
<b>TOTAL</b> 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 9 OF 14	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cooper for Congress**

Full Name (Last, First, Middle Initial) <b>A. Political Financial Management LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2025	
Mailing Address 95 White Bridge Rd Ste 207			FEC Identification Number C	
City Nashville	State TN	Zip Code 37205	Amount of Each Disbursement this Period 510.58	
Purpose of Disbursement Compliance/Accounting		Category/ Type	Transaction ID : SB17.4580	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2025 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼			
State: District:	Special-Primary			

Full Name (Last, First, Middle Initial) <b>B. Wells, David, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2025	
Mailing Address 212 Campus Ln			FEC Identification Number C	
City Knoxville	State TN	Zip Code 37918	Amount of Each Disbursement this Period 325.00	
Purpose of Disbursement Website Expense		Category/ Type	Transaction ID : SB17.4574	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2025 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼			
State: District:	Special-Primary			

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	835.58
<b>TOTAL</b> This Period (last page this line number only).....	4732.67

# 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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Cooper for Congress**

Full Name (Last, First, Middle Initial)  
**A. Varnedoe, Howard, , ,**

Mailing Address 3076 Butler Rd

City Columbia    State TN    Zip Code 38401

Purpose of Disbursement Refund of Contribution

Candidate Name

Office Sought:  House     Senate     President  
 Other (specify) ▼

Disbursement For: 2025  
 Primary     General  
 Other (specify) ▼

State:    District:    Special-General

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 07 / 2025

FEC Identification Number  
C

Amount of Each Disbursement this Period  
1500.00

Transaction ID : SB20A.4564

Memo Item

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

Mailing Address

City    State    Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House     Senate     President  
 Other (specify) ▼

Disbursement For:     Primary     General  
 Other (specify) ▼

State:    District:    Special-General

Date of Disbursement  
M M / D D / Y Y Y Y

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City    State    Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House     Senate     President  
 Other (specify) ▼

Disbursement For:     Primary     General  
 Other (specify) ▼

State:    District:    Special-General

Date of Disbursement  
M M / D D / Y Y Y Y

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1500.00

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Cooper for Congress** Transaction ID : **SC/10.4101**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2025
Cooper, Stuart, , ,			<input type="checkbox"/> Primary
Mailing Address P.O. Box 680372			<input type="checkbox"/> General
City		State	ZIP Code
Franklin	TN	37068	<input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
		<input checked="" type="checkbox"/> Personal Funds of the Candidate	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200.00	0.00	200.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	07 / 17 / 2025	01/31/2040	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	200.00
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **Cooper for Congress** Transaction ID : **SC/10.4292**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2025
Cooper, Stuart, , ,			<input type="checkbox"/> Primary
Mailing Address P.O. Box 680372			<input type="checkbox"/> General
City Franklin		State TN	<input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
ZIP Code 37068		<input checked="" type="checkbox"/> Personal Funds of the Candidate	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1456.06	0.00	1456.06

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	08 / 31 / 2025	01/31/2045	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	1456.06
<b>TOTALS</b> 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**

NAME OF COMMITTEE (In Full) **Cooper for Congress** Transaction ID : **SC/10.4559**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2025
Cooper, Stuart, , ,			<input type="checkbox"/> Primary
Mailing Address P.O. Box 680372			<input type="checkbox"/> General
City Franklin		State TN	<input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
ZIP Code 37068		<input checked="" type="checkbox"/> Personal Funds of the Candidate	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
339.39	0.00	339.39

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	09 / 30 / 2025	01/31/2045	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	339.39
<b>TOTALS</b> 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

NAME OF COMMITTEE (In Full) **Cooper for Congress** Transaction ID : **SC/10.4568**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2025
Cooper, Stuart, , ,			<input type="checkbox"/> Primary
Mailing Address P.O. Box 680372			<input type="checkbox"/> General
City		State	ZIP Code
Franklin	TN	37068	<input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
		<input checked="" type="checkbox"/> Personal Funds of the Candidate	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
449.61	0.00	449.61

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 10 / 20 / 2025	M M / D D / Y Y Y Y 01/31/2045	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	449.61
<b>TOTALS</b> This Period (last page in this line only).....▶	2445.06

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