

# 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

Hiral for Congress

ADDRESS (number and street)

PO Box 43256

Check if different than previously reported. (ACC)

Phoenix

AZ

85080

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00649897

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

AZ

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

/

/

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

/

/

in the State of

5. Covering Period

M M / D D / Y Y Y Y

04 / 01 / 2021

through

M M / D D / Y Y Y Y

04 / 28 / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Jacklin, Katherine, A, ,

Type or Print Name of Treasurer

Signature of Treasurer

Jacklin, Katherine, A, ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 28 / 2021

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									
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**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Hiral for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	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	68908.82
(b) Total Contribution Refunds (from Line 20(d)) .....	625.00	1378.59
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	- 625.00	67530.23
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	1655.75	243812.45
(b) Total Offsets to Operating Expenditures (from Line 14).....	23785.11	23785.11
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	- 22129.36	220027.34
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.00	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**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 05/2016)

Write or Type Committee Name

Hiral for Congress

Report Covering the Period: From:  /  /  To:  /  /

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).....	0.00	22450.00
(ii) Unitemized.....	0.00	42458.82
(iii) TOTAL of contributions from individuals ▶	0.00	64908.82
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	4000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	68908.82
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	2017.34
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	23785.11	23785.11
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	85024.73
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	23785.11	179736.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1655.75	243812.45
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	24683.95	49683.95
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	24683.95	49683.95
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	625.00	1178.57
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	200.02
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	625.00	1378.59
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	26964.70	294874.99

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3179.59
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	23785.11
25. SUBTOTAL (add Line 23 and Line 24).....	26964.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	26964.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3T  
Transaction ID :

Candidate Hiral Vyas Tipirneni has forgiven all personal loans to Committee per signed letter dated April 27, 2021, and mailed to FEC.

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 6 OF 12  
(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)  
**Hiral for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tipirneni, Hiral, , ,**

Mailing Address 5113 W Arrowhead Lakes Dr

City: Glendale State: AZ Zip Code: 85308-9349

FEC ID number of contributing federal political committee: **C H8AZ08083**

Name of Employer: Self Employed Occupation: Physician

Receipt For: 2018  
 Primary  General  
 Other (specify) **Special Primary**

Election Cycle-to-Date: 20000.00

Date of Receipt: 04 / 27 / 2021

Transaction ID : **VTR3SV8E9P2**

Amount of Each Receipt this Period: 20000.00

Memo Item

\* Forgiven Loan for Candidate

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

Mailing Address 5113 W Arrowhead Lakes Dr

City: Glendale State: AZ Zip Code: 85308-9349

FEC ID number of contributing federal political committee: **C H8AZ08083**

Name of Employer: Self Employed Occupation: Physician

Receipt For: 2018  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 316.05

Date of Receipt: 04 / 27 / 2021

Transaction ID : **VTR3SV8FR31**

Amount of Each Receipt this Period: 316.05

Memo Item

\* Forgiven Loan for Candidate

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**TOTAL** This Period (last page this line number only)..... ▶ 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 12  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**AmGUARD Insurance Company**

Mailing Address PO Box 785410

City Philadelphia State PA Zip Code 19178-5410

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

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
123.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 03 / 2021

Transaction ID : VTR3SV8E7W6

Amount of Each Receipt this Period  
123.00

Memo Item

Insurance Refund

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

Mailing Address 2601 Ocean Park Blvd Ste 324

City Santa Monica State CA Zip Code 90405-5297

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

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
23662.11

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 21 / 2021

Transaction ID : VTR3SV8E7X3

Amount of Each Receipt this Period  
23662.11

Memo Item

Advertising Refund

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	23785.11
<b>TOTAL</b> This Period (last page this line number only).....▶	23785.11

**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 12			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 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)  
**Hiral for Congress**

Full Name (Last, First, Middle Initial) <b>A. KJ Bookkeeping LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2021		
Mailing Address 6232 W Pontiac Dr			FEC Identification Number C		
City Glendale	State AZ	Zip Code 85308-6788	Amount of Each Disbursement this Period 1500.00		
Purpose of Disbursement Accounting/Compliance Services		Category/ Type 001	Transaction ID : VTQ4H9ZPFX9		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. OneAZ Credit Union</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2021		
Mailing Address 2355 W Pinnacle Peak Rd			FEC Identification Number C		
City Phoenix	State AZ	Zip Code 85027-1280	Amount of Each Disbursement this Period 9.95		
Purpose of Disbursement Bank Fees		Category/ Type 001	Transaction ID : VTQ4H9ZPEA8		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Rackspace</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2021		
Mailing Address 1 Fanatical PI			FEC Identification Number C		
City San Antonio	State TX	Zip Code 78218-2179	Amount of Each Disbursement this Period 138.25		
Purpose of Disbursement Email Service		Category/ Type 001	Transaction ID : VTQ4H9ZPEC4		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1648.20
<b>TOTAL</b> This Period (last page this line number only).....▶	1648.20



**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 12	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Tipirneni, Hiral, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2021
Mailing Address 5113 W Arrowhead Lakes Dr		FEC Identification Number C H8AZ08083
City Glendale	State AZ	Zip Code 85308-9349
Purpose of Disbursement Forgiven Loan for Candidate	Category/ Type 009	
Candidate Name <b>Tipirneni, Hiral, , ,</b>	Amount of Each Disbursement this Period 20000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special Primary	Transaction ID : VTQ4H9ZPEG6 <input checked="" type="checkbox"/> Memo Item *
State: AZ District: 08		

Full Name (Last, First, Middle Initial) <b>B. Tipirneni, Hiral, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2021
Mailing Address 5113 W Arrowhead Lakes Dr		FEC Identification Number C H8AZ08083
City Glendale	State AZ	Zip Code 85308-9349
Purpose of Disbursement Partial Loan Repayment	Category/ Type 009	
Candidate Name <b>Tipirneni, Hiral, , ,</b>	Amount of Each Disbursement this Period 24683.95	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VTQ4H9ZPFY7 <input type="checkbox"/> Memo Item
State: AZ District: 08		

Full Name (Last, First, Middle Initial) <b>C. Tipirneni, Hiral, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2021
Mailing Address 5113 W Arrowhead Lakes Dr		FEC Identification Number C H8AZ08083
City Glendale	State AZ	Zip Code 85308-9349
Purpose of Disbursement Forgiven Loan for Candidate	Category/ Type 009	
Candidate Name <b>Tipirneni, Hiral, , ,</b>	Amount of Each Disbursement this Period 316.05	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VTQ4H9ZPFZ5 <input checked="" type="checkbox"/> Memo Item *
State: AZ District: 08		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	24683.95
<b>TOTAL</b> This Period (last page this line number only).....▶	24683.95

**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)	PAGE 10 OF 12			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) <b>A. Malamud, Daniel, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y <b>04 / 16 / 2021</b>		
Mailing Address 907 Cumberland Rd NE			FEC Identification Number <b>C</b>		
City Atlanta	State GA	Zip Code 30306-3213	Amount of Each Disbursement this Period <b>625.00</b>		
Purpose of Disbursement Refund of Earmarked Monetary Contributions		Category/ Type <b>010</b>	Transaction ID : <b>VTQ4H9ZPED2</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number <b>C</b>		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	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:					

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 <b>C</b>		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	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).....▶	<b>625.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>625.00</b>

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Hiral for Congress** Transaction ID : **VTR3SAGKE42L**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Tipirneni, Hiral, , ,		<input type="checkbox"/> Memo Item	Election: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 5113 W Arrowhead Lakes Dr			
City Glendale	State AZ	ZIP Code 85308-9349	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 50000.00	Cumulative Payment To Date 50000.00	Balance Outstanding at Close of This Period 0.00
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<b>TERMS</b>	Date Incurred M 09 / D 25 / Y 2017	Date Due M / D / Y none	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....▶	0.00
<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) **Hiral for Congress** Transaction ID : **VTR3SC0RQJ4L**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Tipirneni, Hiral, , ,		<input type="checkbox"/> Memo Item	Election: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special Primary
Mailing Address 5113 W Arrowhead Lakes Dr			
City Glendale	State AZ	ZIP Code 85308-9349	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 20000.00	Cumulative Payment To Date 20000.00	Balance Outstanding at Close of This Period 0.00
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<b>TERMS</b>	Date Incurred M 12 / D 29 / Y 2017	Date Due M / D / Y none	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....▶	0.00
<b>TOTALS</b> This Period (last page in this line only).....▶	0.00

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