

**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

ELECT JIM BAIRD FOR CONGRESS

ADDRESS (number and street)

P.O. BOX 203



Check if different than previously reported. (ACC)

GREENCASTLE

IN

46135

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00662940

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

IN

04

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

11 29 / 2022

through

M M / D D / Y Y Y Y

12 31 / 2022

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

BAIRD, JAMES R PHD, R, Dr.,

Type or Print Name of Treasurer

Signature of Treasurer

BAIRD, JAMES R PHD, R, Dr.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01 31 / 2023

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 05/2016)

PAGE 2 / 12

Write or Type Committee Name

ELECT JIM BAIRD FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	9		2	0	2	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	2

	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))....	3035.00	410383.36
(b) Total Contribution Refunds (from Line 20(d))	100.00	300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	2935.00	410083.36
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	19199.68	240637.78
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	532.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	19199.68	240105.78
8. Cash on Hand at Close of Reporting Period (from Line 27).....	340742.15	
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)	170000.00	

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

PAGE 3 / 12

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

ELECT JIM BAIRD FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	9		2	0	2	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	2

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

137113.01

(ii) Unitemized.....

35.00

49490.85

(iii) TOTAL of contributions from individuals ▶

35.00

186603.86

(b) Political Party Committees.....

0.00

0.00

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

3000.00

223779.50

(d) The Candidate.....

0.00

0.00

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

3035.00

410383.36

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

3354.17

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.)

0.00

532.00

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)..... ▶

3035.00

414269.53

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 12

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	19199.68	240637.78
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	100.00	300.00
(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)).....	100.00	300.00
21. OTHER DISBURSEMENTS	0.00	73400.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	19299.68	314337.78

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	357006.83
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3035.00
25. SUBTOTAL (add Line 23 and Line 24).....	360041.83
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	19299.68
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	340742.15

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 5 OF 12

☐ 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)

ELECT JIM BAIRD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ALLISON TRANSMISSION INC. POLITICAL ACTION COMMITTEE

Mailing Address ONE ALLISON WAY

City

INDIANAPOLIS

State

IN

Zip Code

46222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 14 2022

Transaction ID : SA11C.10804

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NATIONAL PRO-LIFE ALLIANCE PAC

Mailing Address 5211 PORT ROYAL RD
SUITE 500

City

SPRINGFIELD

State

VA

Zip Code

22151

FEC ID number of contributing
federal political committee.

C

C00358051

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 28 2022

Transaction ID : SA11C.10805

Amount of Each Receipt this Period

500.00

☐ 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 ☐ 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

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

3000.00

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

3000.00

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

PAGE 6 OF 12

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

ELECT JIM BAIRD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. APPLE INC

Mailing Address 8702 KEYSTONE CROSSING

City
INDIANAPOLISState
INZip Code
46240Purpose of Disbursement
MOBILE PHONE EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

854.93

Transaction ID : SB17.10811

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

340.90

Transaction ID : SB17.10813

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. COSTCO

Mailing Address 8816 DR. CHARLES NELSON DRIVE

City
AVONState
INZip Code
46123Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	3		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

75.39

Transaction ID : SB17.10814

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

1271.22

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)

ELECT JIM BAIRD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. COSTCO

Mailing Address 8816 DR. CHARLES NELSON DRIVE

City
AVONState
INZip Code
46123Purpose of Disbursement
SECURITY EQUIPMENT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	8		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

106.99

Transaction ID : SB17.10815

☐ Memo Item**B. COSTCO**

Mailing Address 8816 DR. CHARLES NELSON DRIVE

City
AVONState
INZip Code
46123Purpose of Disbursement
SECURITY EQUIPMENT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	9		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

342.38

Transaction ID : SB17.10816

☐ Memo Item**C. COSTCO**

Mailing Address 8816 DR. CHARLES NELSON DRIVE

City
AVONState
INZip Code
46123Purpose of Disbursement
SECURITY EQUIPMENT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	9		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

802.47

Transaction ID : SB17.10817

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

1251.84

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)

ELECT JIM BAIRD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FUNDRAISING, INC.Mailing Address 800 W 47TH ST.
STE 200City
KANSAS CITYState
MOZip Code
64112Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
12	09	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

1650.00

Transaction ID : SB17.10823

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FUNDRAISING, INC.Mailing Address 800 W 47TH ST.
STE 200City
KANSAS CITYState
MOZip Code
64112Purpose of Disbursement
FUNDRAISING CONSULTING & EXPENSES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
12	19	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

2033.33

Transaction ID : SB17.10824

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JAMES R BAIRD

Mailing Address PO BOX 203

City
GREENCASTLEState
INZip Code
46235Purpose of Disbursement
CANDIDATE REIMBURSEMENT: SEE ITEMIZATION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
12	19	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

742.80

Transaction ID : SB17.10828

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

4426.13

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

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

PAGE 9 OF 12

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

ELECT JIM BAIRD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PATTERSON CONSULTING

Mailing Address 4666 BOULEVARD PLACE

City
INDIANAPOLISState
INZip Code
46208Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	2		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.10831

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PATTERSON CONSULTING

Mailing Address 4666 BOULEVARD PLACE

City
INDIANAPOLISState
INZip Code
46208Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	2		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

3539.84

Transaction ID : SB17.10832

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RED CURVE SOLUTIONSMailing Address 138 CONANT STREET
SECOND FLOORCity
BEVERLYState
MAZip Code
01915Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	9		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

2829.94

Transaction ID : SB17.10833

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

8369.78

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

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

PAGE 10 OF 12

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

ELECT JIM BAIRD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. RED CURVE SOLUTIONSMailing Address 138 CONANT STREET
SECOND FLOORCity
BEVERLYState
MAZip Code
01915Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

2800.00

Transaction ID : SB17.10834

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RING INC

Mailing Address 1523 26TH ST

City
SANTA MONICAState
CAZip Code
90404Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		29		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

347.71

Transaction ID : SB17.10836

☐ 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

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

3147.71

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

18466.68

SCHEDULE C (FEC Form 3)
LOANS

PAGE 11 OF 12

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 : SC/10.4101

ELECT JIM BAIRD FOR CONGRESS

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

BAIRD, JAMES R PHD, R, Dr.,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 203

City

State

ZIP Code

GREENCASTLE

IN

46235

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

200000.00

80000.00

120000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 12^MD 01^DY 2017^Y

M M

D D

Y 12/31/2020^Y

3.00

% (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).....▶

120000.00

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 12 OF 12

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4361

ELECT JIM BAIRD FOR CONGRESS

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

BAIRD, JAMES R PHD, R, Dr.,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 203

City

State

ZIP Code

GREENCASTLE

IN

46235

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

50000.00

0.00

50000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 04 M /

D 27 D /

Y 2018 Y

M M /

D D /

Y 12/31/2020 Y

3.00

% (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).....▶

50000.00

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

170000.00

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