

**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

Help Elect Maura Keller

ADDRESS (number and street)

185 KATHI AVENUE

Check if different
than previously
reported. (ACC)

FAYETTEVILLE

GA

30214

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00866475

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

GA

03

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
01 / 01 / 2025

through

M M / D D / Y Y Y Y
03 / 31 / 2025*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

Keller, Maura, Kathleen, Ms.,

Signature of Treasurer

Keller, Maura, Kathleen, Ms.,

Date

M M / D D / Y Y Y Y
03 / 31 / 2025

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

Help Elect Maura Keller

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2025

To:

MM / DD / YYYY
03 / 31 / 2025

	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	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3406.28	3406.28
(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))	3406.28	3406.28
8. Cash on Hand at Close of Reporting Period (from Line 27)	25591.54	
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)	25160.82	

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

Help Elect Maura Keller

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2025

To:

MM / DD / YYYY
03 / 31 / 2025**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).....

(ii) Unitemized

(iii) TOTAL of contributions
from individuals ▶

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs)

(d) The Candidate

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

13. LOANS:

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

(b) All Other Loans.....

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)15. OTHER RECEIPTS
(Dividends, Interest, etc.)16. **TOTAL RECEIPTS** (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

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.....	3406.28	3406.28
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	359.18	359.18
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	359.18	359.18
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	3765.46	3765.46

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	29357.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	29357.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3765.46
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	25591.54

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F3T

Transaction ID :

This is my Termination Report. Please Let me know if you require anything else. All bank accounts have been closed. All personal loans that I provided the campaign are forgiven.

Form/Schedule:

Transaction ID:

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 20

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 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)

Help Elect Maura Keller

Full Name (Last, First, Middle Initial)

A. Alex Waterson

Mailing Address 185 Kathi Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2025

City
FayettevilleState
GAZip Code
30214-1635

FEC Identification Number

C

Purpose of Disbursement
Social Media Marketing

001

Amount of Each Disbursement this Period

300.00

Transaction ID : 500147663

☐ Memo Item Social Media Marketing

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. NGP VAN INCMailing Address 1420 New York Ave NW
Ste 650

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2025

City
WashingtonState
DCZip Code
20005-6210

FEC Identification Number

C

Purpose of Disbursement
Database

001

Amount of Each Disbursement this Period

2895.00

Transaction ID : 500148834

☐ Memo Item Database

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

3195.00

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

3195.00

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SB17

Transaction ID : 500147663

Social Media Marketing

Form/Schedule: SB17

Transaction ID: 500148834

Database

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

PAGE 8 OF 20

☐ 17	☐ 18	☐ 19a	☒ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Help Elect Maura Keller

Full Name (Last, First, Middle Initial)

A. Keller, Maura, , ,

Mailing Address 115 Helena Ct

City
FayettevilleState
GAZip Code
30215-2237Purpose of Disbursement
Repayment of Loan

009

Candidate Name

Category/
Type

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
0	1		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

359.18

Transaction ID : 500148854

☐ Memo Item Loan Repayment

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

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

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

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).....▶

359.18

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

359.18

SCHEDULE C (FEC Form 3)
LOANS

PAGE 9 OF 20

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 : 5377516L

Help Elect Maura Keller

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Keller, Maura, , ,

Mailing Address

115 Helena Ct

City

Fayetteville

State

GA

ZIP Code

30215-2237

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

3845.66

Balance Outstanding at Close of This Period

6154.34

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 07 / 2024M M / D D / Y Y Y Y
noneM 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).....▶

6154.34

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.

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : 5377516L

Personal Money to help fund the campaign

Form/Schedule:

Transaction ID:

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

PAGE 11 OF 20

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

NAME OF COMMITTEE (In Full)

Transaction ID : 5377580L

Help Elect Maura Keller

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Keller, Maura, , ,

Mailing Address

115 Helena Ct

City

Fayetteville

State

GA

ZIP Code

30215-2237

☒ Personal Funds of the Candidate

Original Amount of Loan

5220.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5220.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 06 / 2024

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).....▶

5220.00

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.

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : 5377580L

Fee to qualify run for Congress

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

PAGE 13 OF 20

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 : 5313666L

Help Elect Maura Keller

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Keller, Maura, , ,

Mailing Address

115 Helena Ct

City

Fayetteville

State

GA

ZIP Code

30215-2237

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 / 25 / 2024M M / D D / Y Y Y Y
/ / noneM M / D D / Y Y Y Y
/ / noneM 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).....▶

10000.00

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.

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : 5313666L

Personal funds to pay staff and campaign

Form/Schedule:

Transaction ID:

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

PAGE 15 OF 20

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

NAME OF COMMITTEE (In Full)

Transaction ID : 5377522L

Help Elect Maura Keller

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Keller, Maura, , ,

Mailing Address

115 Helena Ct

City

Fayetteville

State

GA

ZIP Code

30215-2237

☒ Personal Funds of the Candidate

Original Amount of Loan

300.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

300.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 02 / 2024

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).....▶

300.00

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.

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : 5377522L

Personal Funds to attend Democratic Political Event

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

PAGE 17 OF 20

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 : 5377568L

Help Elect Maura Keller

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

Election: 2024

☐ Primary☒ General☐ Other (specify) ▼

Keller, Maura, , ,

Mailing Address

115 Helena Ct

City

Fayetteville

State

GA

ZIP Code

30215-2237

☒ Personal Funds of the Candidate

Original Amount of Loan

1601.88

Cumulative Payment To Date

359.18

Balance Outstanding at Close of This Period

1242.70

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 01 / 2024

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).....▶

1242.70

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.

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : 5377568L

Personal funds to pay staff

Form/Schedule:

Transaction ID:

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

PAGE 19 OF 20

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

NAME OF COMMITTEE (In Full)

Transaction ID : 5377571L

Help Elect Maura Keller

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

Election: 2024

☐ Primary☒ General☐ Other (specify) ▼

Keller, Maura, , ,

Mailing Address

115 Helena Ct

City

Fayetteville

State

GA

ZIP Code

30215-2237

☒ Personal Funds of the Candidate

Original Amount of Loan

2243.78

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2243.78

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 12 / 2024M M / D D / Y Y Y Y
noneM 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).....▶

2243.78

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

25160.82

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

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SC/10

Transaction ID : 5377571L

Personal funds to pay staff

Form/Schedule:

Transaction ID: