

**CAMPAIGN FINANCE REPORT  
LOCAL COMMITTEES OF WISCONSIN**

**RECEIVED**

Is This Report an Amendment:     Yes             No

Instructions for completing schedules are on the back of each schedule.    2015 AUG 12 A 10:19

**COMMITTEE IDENTIFICATION**

Name of Committee: **FRIENDS OF TIM CARPENTER**  
 Street Address: **2957 S. 38<sup>TH</sup> ST.**  
 City, State and Zip Code: **MILWAUKEE, WI 53215**

**CITY OF MILWAUKEE  
ELECTION COMMISSION**

**OFFICE USE ONLY**

Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form.   

**NAME OF REPORT**

- January Continuing     Pre-Primary     Spring     Fall     Special  
 July Continuing     Pre-Election **2015**     Spring     Fall     Special     Termination Report also complete Schedule 4

**SUMMARY OF RECEIPTS AND DISBURSEMENTS**

|  | Column A<br>This Period | Column B<br>Calendar<br>Year-To-Date |
|--|-------------------------|--------------------------------------|
| <b>1. RECEIPTS</b>                                     |                         |                                      |
| 1A. Contributions (Including Loans) from Individuals   | \$ 4,658.07             | \$ 5,148.07                          |
| 1B. Contributions from Committees (Transfers-In)       | \$ 2,456.00             | \$ 2,456.00                          |
| 1C. Other Income and Commercial Loans                  | \$ 00.00                | \$ 00.00                             |
| <b>TOTAL RECEIPTS</b> (Add totals from 1A, 1B and 1C)  | \$ 7,114.04             | \$ 7,604.07                          |
| <b>2. DISBURSEMENTS</b>                                |                         |                                      |
| 2A. Gross Expenditures                                 | \$ 3,438.06             | \$ 5,350.49                          |
| 2B. Contributions to Committees (Transfers-Out)        | \$ 00.00                | \$ 00.00                             |
| <b>TOTAL DISBURSEMENTS</b> (Add totals from 2A and 2B) | \$ 3,438.06             | \$ 5,350.49                          |

**CASH SUMMARY**

|   |             |
|---|-------------|
| Cash Balance Beginning of Report  | \$ 1,957.72 |
| Total Receipts  | \$ 7,114.04 |
| Subtotal  | \$ 9,071.76 |
| Total Disbursements   | \$ 3,438.06 |
| <b>CASH BALANCE END OF REPORT</b>                                       | \$ 5,633.70 |
| <b>INCURRED OBLIGATIONS</b><br>(Balance at the Close of This Period-3A) | \$          |
| <b>LOANS</b> (Balance at the Close of This Period-3B)                   | \$ 2,838.07 |

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 Candidate or Treasurer<br><b>TIM CARPENTER</b> | Signature of Candidate or Treasurer<br><i>Tim Carpenter</i> | Date: <b>8/10/15</b>                 |
|  | Email: <b>CARPENTERFORALDERMAN@GMAIL.COM</b>                | Daytime Phone: <b>(414) 719-9957</b> |

**NOTE:** The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

Complete Committee Name  
**FRIENDS OF TIM CARPENTER**

Instructions for completing schedules are on the back of each schedule.

| Date   | Full Name, Mailing Address and Zip Code                 | Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100) | Amount | Calendar Year-to-Date Total |
|--|---|---|--------|-----------------------------|
| 7/16/15  | LORRAINE O'MALLEY<br>3030 S. 57TH ST.<br>MKE, WI 53219  |   | \$100  | \$100                       |
| Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit      Conduit Name: _____ |   |   |        |                             |
| 7/16/15  | SHARON COOK<br>2974 S. DELAWARE<br>MKE, WI 53207        |   | \$50   | \$50                        |
| Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit      Conduit Name: _____ |   |   |        |                             |
| 7/16/15  | BARRY ZALBEN<br>3325 S. PRINCETON<br>MKE, WI 53215      |   | \$50   | \$50                        |
| Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit      Conduit Name: _____ |   |   |        |                             |
| 7/13/15  | GARY MIKOLAK 2YK<br>2319 W. BRIDGE<br>MKE, WI 53221     |   | \$50   | \$50                        |
| Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit      Conduit Name: _____ |   |   |        |                             |
| 7/20/15  | FRED KESSLER<br>9312 W. CLOVERNOOK ST.<br>MKE, WI 53224 |   | \$100  | \$100                       |
| Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit      Conduit Name: _____ |   |   |        |                             |
| 7/27/15  | JOHN LAFAVE<br>7861 N. 46TH ST.<br>BROWN DEER, WI 53223 |   | \$35   | \$35                        |
| Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit      Conduit Name: _____ |   |   |        |                             |
| 7/27/15  | BARRY ZALBEN<br>3325 S. PRINCETON<br>MKE, WI 53215      |   | \$25   | \$75                        |
| Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit      Conduit Name: _____ |   |   |        |                             |
| 7/27/15  | HAROLD ANDERSON<br>3400 S. 56TH ST.<br>MKE, WI 53219    |   | \$50   | \$50                        |
| Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit      Conduit Name: _____ |   |   |        |                             |

**SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE**

\$ 460

**TOTAL ITEMIZED CONTRIBUTIONS**

\$

**TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS**

\$

**TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS**

\$

**RECEIPTS**  
**Contributions (Including Loans) From Individuals**

Complete Committee Name  
**FRIENDS OF TIM CARPENTER**

Instructions for completing schedules are on the back of each schedule.

| Date    | Full Name, Mailing Address and Zip Code   | Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100) | Amount | Calendar Year-to-Date Total |
|---------|---|---|--------|-----------------------------|
| 7 29 15 | JASON RAE<br>2779 S. DELAWARE<br>MKE, WI 53207  |   | \$75   | \$75                        |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: _____   |        |                             |
| 7 29 15 | KEVIN KANE<br>3760 S. 86 <sup>TH</sup> ST.<br>MKE, WI 53228   |   | \$25   | \$25                        |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: _____   |        |                             |
| 7 29 15 | TIMOTHY COLLEN<br>3711 N. SPRING HILL DR.<br>JANESVILLE, WI 53545   | RETIRED   | \$400  | \$400                       |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: _____   |        |                             |
| 7 29 15 | CARLOS DEARTEAGA<br>3615 W. OHIO AV.<br>MKE, WI 53215   |   | \$100  | \$100                       |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: _____   |        |                             |
| 8 13 15 | DAVID GEIER<br>1915 S. 16 <sup>TH</sup> ST.<br>MKE, WI 53204  |   | \$30   | \$30                        |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: _____   |        |                             |
| 8 13 15 | AUDREY GABROVIC<br>4133 S. 3 <sup>RD</sup> AL.<br>MKE, WI 53207   |   | \$50   | \$50                        |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: _____   |        |                             |
| 8 13 15 | MICHAEL DORSZYNSKI<br>2787 S. 58 <sup>TH</sup> ST.<br>MKE, WI 53219                                       |   | \$25   | \$25                        |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: _____   |        |                             |
| 8 13 15 | MURIEL PLICHTA<br>3218 S. 41 <sup>ST</sup> ST.<br>MKE, WI 53215   |   | \$25   | \$25                        |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name: _____   |        |                             |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 730

TOTAL ITEMIZED CONTRIBUTIONS

\$ 1,190

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

**SCHEDULE 1-A**

**RECEIPTS**

**Contributions (Including Loans) From Individuals**

Complete Committee Name  
**FRIENDS OF TIM CARPENTER**

Instructions for completing schedules are on the back of each schedule.

| Date    | Full Name, Mailing Address and Zip Code   | Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100) | Amount | Calendar Year-to-Date Total |
|---------|---|---|--------|-----------------------------|
| 8/13/15 | PAMELA GALASINSKI<br>2718 S. 68 <sup>TH</sup> ST.<br>MKE, WI 53219  |   | \$25   | \$25                        |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name:   |        |                             |
| 8/13/15 | GAIL PASSLER<br>4421 W. BOTTSFORD<br>GREENFIELD, WI 53220   |   | \$50   | \$50                        |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name:   |        |                             |
| 8/13/15 | JERELYN ZERNICK<br>3367 S. 25 <sup>TH</sup> ST.<br>MKE, WI 53215  |   | \$50   | \$50                        |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name:   |        |                             |
| 8/13/15 | OLIVER HAASE<br>5462 S. 45 <sup>TH</sup> ST.<br>GREENFIELD, WI 53220                                      |   | \$50   | \$50                        |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name:   |        |                             |
| 8/13/15 | FRED RISSER<br>16 N. CARROLL #200<br>MSN, WI 53703  |   | \$50   | \$50                        |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name:   |        |                             |
| 8/13/15 | MICHAL DAWSON<br>4041 N. OAKLAND #617<br>SHOREWOOD, WI 53211  |   | \$100  | \$100                       |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name:   |        |                             |
| 8/13/15 | SOPHIE SZEJNA<br>3132 S. 34 <sup>TH</sup> ST.<br>MKE, WI 53215  | RETIRED   | \$100  | \$100                       |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name:   |        |                             |
| 8/13/15 | ROBERT WELCH<br>7252 W. GEORGIA<br>MKE, WI 53220  | RETIRED   | \$250  | \$250                       |
|         | Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit | Conduit Name:   |        |                             |

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 675

TOTAL ITEMIZED CONTRIBUTIONS

\$ 1,865

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

**SCHEDULE 1-A**

**RECEIPTS**

**Contributions (Including Loans) From Individuals**

Complete Committee Name  
FRIENDS OF TIM CARPENTER

Instructions for completing schedules are on the back of each schedule.

| Date    | Full Name, Mailing Address and Zip Code                        | Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100) | Amount     | Calendar Year-to-Date Total |
|---------|--|---|------------|-----------------------------|
| 8/13/15 | LENA TAYLOR<br>3428 W. STATE<br>MKE, WI 53208                  | STATE SENATOR<br>STATE CAPITOL 1 <sup>ST</sup> FL.<br>MSW, WI 53707                                 | \$300      | \$300                       |
| 7/11/15 | TIM CARPENTER<br>2957 S. 38 <sup>TH</sup> ST.<br>MKE, WI 53215 | STATE LEGISLATOR<br>129 SOUTH STATE CAPITOL<br>MADISON, WI 53707                                    | \$2,348.07 | \$2,838.07                  |
| / /     |  |   |            |                             |
| / /     |  |   |            |                             |
| / /     |  |   |            |                             |
| / /     |  |   |            |                             |
| / /     |  |   |            |                             |
| / /     |  |   |            |                             |
| / /     |  |   |            |                             |
| / /     |  |   |            |                             |

|   |             |
|---|-------------|
| SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE     | \$ 2,648.04 |
| TOTAL ITEMIZED CONTRIBUTIONS                  | \$ 4,513.07 |
| TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS   | \$ 145      |
| TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS | \$ 4,658.07 |

**SCHEDULE 1-B**

**RECEIPTS**  
**Contributions from Committees**  
**(Transfers-In)**

Complete Committee Name  
**FRIENDS OF TIM CARPENTER**

Instructions for completing schedules are on the back of each schedule.

| Date    | Full Name of Committee, Mailing Address and Zip Code   | Amount   | Calendar Year-To-Date Total |
|---------|--|----------|-----------------------------|
| 7 27 15 | AFSCME COUNCIL 40<br>8033 EXCELSIOR DR SUITE A<br>MSN, WI 53717<br>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan              | \$300.00 | \$300.00                    |
| 7 27 15 | FRIENDS OF ROBERT WIRCH<br>P.O. BOX 99<br>KENOSHA, WI 53141<br>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan                  | \$200.00 | \$200.00                    |
| 7 27 15 | THE MORRIS COMMITTEE<br>1825 N. COMMERCE ST. #300<br>MKE, WI 53212<br>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan           | \$250.00 | \$250.00                    |
| 7 27 15 | RIEMER FOR ASSEMBLY<br>3711 W. OKLAHOMA AVE.<br>MKE, WI 53215<br>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan                | \$300.00 | \$300.00                    |
| 7 29 15 | LAW SE AREA COUNCIL<br>7435 S HOWELL AVE.<br>WALK CREEK, WI 53154<br>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan            | \$300.00 | \$300.00                    |
| 7 29 15 | SEIU COUNCIL<br>600 W. VIRGINIA #202<br>MKE, WI 53204<br>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan                        | \$306.00 | \$306.00                    |
| 7 30 15 | OPERATING ENGINEERS LOCAL 139<br>N27 W23233 ROUNDY DR.<br>PEWAUKEE, WI 53072<br>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan | \$300.00 | \$300.00                    |
| 8 13 15 | FRIENDS OF DAVID HANSEN<br>3489 BLACKWOLF RUN<br>GREEN BAY, WI 54311<br>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan         | \$100.00 | \$100.00                    |
| 8 13 15 | WI FEDERATION OF NURSES<br>9620 W. GREENFIELD<br>WEST ALLIS, WI 53214<br>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan        | \$300.00 | \$300.00                    |
| 8 13 15 | FRIENDS OF MARK MILLER<br>4703 ROIGAN TERR.<br>MONONA, WI 53716<br>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan              | \$100.00 | \$100.00                    |

SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE

\$ 2,456.00

TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES

\$ 2,456.00



**SCHEDULE 2-A**

**DISBURSEMENTS**  
Gross Expenditures

Complete Committee Name  
**FRIENDS OF TIM CARPENTER**

Instructions for completing schedules are on the back of each schedule.

| Date    | Full Name, Mailing Address and Zip Code<br>Of Person or Business to Whom Payment is Made  | Specific Purpose of Expenditure     | Amount     |
|---------|---|-------------------------------------|------------|
| 7/14/15 | SSSPEEDY INC<br>2256 S. 116 <sup>TH</sup> ST.<br>MKE, WI 53227<br>Check if: <input type="checkbox"/> In-Kind Offset                           | MAILING                             | \$1,089.99 |
| 7/14/15 | US POST OFFICE<br>4366 W. LINCOLN AV.<br>MKE, WI 53215<br>Check if: <input type="checkbox"/> In-Kind Offset                                   | POSTAGE                             | \$1,727.56 |
| 7/14/15 | KINKOS<br>4736 S. 76 <sup>TH</sup> ST<br>GREENFIELD, WI 53220<br>Check if: <input type="checkbox"/> In-Kind Offset                            | COPIES                              | \$54.54    |
| 7/14/15 | OFFICE MAX<br>3555 S 27 <sup>TH</sup> ST.<br>MKE, WI 53221<br>Check if: <input type="checkbox"/> In-Kind Offset                               | INK CARTRIDGE                       | \$84.47    |
| 7/14/15 | AMAZON<br>172 TRADE ST.<br>LEXINGTON, KY 40511<br>Check if: <input type="checkbox"/> In-Kind Offset   | CANDY FOR PARADES<br>PARKS CONCERTS | \$140.40   |
| 7/14/15 | SAM'S CLUB<br>1540 S. 108 <sup>TH</sup> ST.<br>MKE, WI 53227<br>Check if: <input type="checkbox"/> In-Kind Offset                             | OFFICE SUPPLIES                     | \$83.34    |
| 7/14/15 | DEMOCRATIC PARTY<br>PO. BOX 630<br>MKE, WI 53201<br>Check if: <input type="checkbox"/> In-Kind Offset   | VOTER FILE                          | \$212.76   |
| 7/13/15 | MKE ELECTION COMMISSION<br>200 E. WELLS ST. #FL.<br>MKE, WI 53202<br>Check if: <input type="checkbox"/> In-Kind Offset                        | VOTER LIST                          | \$45.00    |
| 1/1     | Full Name, Mailing Address and Zip Code<br>Of Person or Business to Whom Payment is Made<br>Check if: <input type="checkbox"/> In-Kind Offset | Specific Purpose of Expenditure     | Amount     |

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$ 3,438.06

TOTAL ITEMIZED EXPENDITURES \$

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS \$

TOTAL EXPENDITURES \$ 3,438.06



**SCHEDULE 3-A**

**ADDITIONAL DISCLOSURE  
Incurred Obligations Excluding Loans**

Complete Committee Name  
**FRIENDS OF TIM CARPENTER**

Instructions for completing schedules are on the back of each schedule.

| Date                     | Full Name, Mailing Address and Zip Code of Creditor | Outstanding Balance Beginning This Period | New Obligations or Additions This Period | Cumulative Payments This Period | Outstanding Balance At Close of This Period |
|--------------------------|---|---|--|---------------------------------|---|
| / /                      |   |   |  |                                 |   |
| Nature of Debt (Purpose) |   |   |  |                                 |   |
| / /                      |   |   |  |                                 |   |
| Nature of Debt (Purpose) |   |   |  |                                 |   |
| / /                      |   |   |  |                                 |   |
| Nature of Debt (Purpose) |   |   |  |                                 |   |
| / /                      |   |   |  |                                 |   |
| Nature of Debt (Purpose) |   |   |  |                                 |   |
| / /                      |   |   |  |                                 |   |
| Nature of Debt (Purpose) |   |   |  |                                 |   |
| / /                      |   |   |  |                                 |   |
| Nature of Debt (Purpose) |   |   |  |                                 |   |
| / /                      |   |   |  |                                 |   |
| Nature of Debt (Purpose) |   |   |  |                                 |   |

|  |    |              |
|--|----|--------------|
| <b>SUBTOTAL ITEMIZED OBLIGATIONS THIS PAGE</b>   | \$ |              |
| <b>TOTAL ITEMIZED OBLIGATIONS</b>                | \$ |              |
| <b>TOTAL UNITEMIZED OBLIGATIONS \$20 OR LESS</b> | \$ |              |
| <b>TOTAL INCURRED OBLIGATIONS</b>                | \$ | <b>00.00</b> |

**SCHEDULE 3-B**

**ADDITIONAL DISCLOSURE**  
**Loans**  
**Individual, Committee or Commercial**

Complete Committee Name  
FRIENDS OF TIM CARPENTER

Instructions for completing schedules are on the back of each schedule.

| Date    | Full Name, Mailing Address and Zip Code of Loan Source                         | Outstanding Balance Beginning of This Period | New Loans This Period | Cumulative Payments This Period | Outstanding Balance End of This Period |
|---------|--|--|-----------------------|---------------------------------|--|
| 7/14/15 | TIM CARPENTER - PERSONAL LOAN<br>2957 S. 38 <sup>TH</sup> ST.<br>MKE, WI 53215 | \$490  | \$2,348.07            |                                 | \$2,838.07                             |

List All Endorsers or Guarantors (if any)

|  |                                     |
|--|-------------------------------------|
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation                          |
|  | Name and Address of Employer        |
|  | Amount Guaranteed Outstanding<br>\$ |
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation                          |
|  | Name and Address of Employer        |
|  | Amount Guaranteed Outstanding<br>\$ |

| Date | Full Name, Mailing Address and Zip Code of Loan Source | Outstanding Balance Beginning of This Period | New Loans This Period | Cumulative Payments This Period | Outstanding Balance End of This Period |
|------|--|--|-----------------------|---------------------------------|--|
| / /  |  |  |                       |                                 |  |

List All Endorsers or Guarantors (if any)

|  |                                     |
|--|-------------------------------------|
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation                          |
|  | Name and Address of Employer        |
|  | Amount Guaranteed Outstanding<br>\$ |
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation                          |
|  | Name and Address of Employer        |
|  | Amount Guaranteed Outstanding<br>\$ |

| Date | Full Name, Mailing Address and Zip Code of Loan Source | Outstanding Balance Beginning of This Period | New Loans This Period | Cumulative Payments This Period | Outstanding Balance End of This Period |
|------|--|--|-----------------------|---------------------------------|--|
| / /  |  |  |                       |                                 |  |

List All Endorsers or Guarantors (if any)

|  |                                     |
|--|-------------------------------------|
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation                          |
|  | Name and Address of Employer        |
|  | Amount Guaranteed Outstanding<br>\$ |
| Full Name, Mailing Address and Zip Code of Guarantor | Occupation                          |
|  | Name and Address of Employer        |
|  | Amount Guaranteed Outstanding<br>\$ |

**SUBTOTAL OUTSTANDING LOANS THIS PAGE**

\$

**TOTAL OUTSTANDING LOANS**

\$2,838.07