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

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

FOR LINE NUMBER: (check only one)

PAGE

	13a
	10h

OF

NA

LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Memo Item	Election: Primary General	
Mailing Address			Other (specify) ▼	
City	State ZIP C	Code		
Original Amount of Loan	Cumulative Payment ⁻	To Date	Balance Outstanding at Close of This Peri	
TERMS	D.I. D.			
Date Incurred M M M / D D / Y Y Y Y	Date Du	e Interest	Rate Secured: % (apr) Yes	
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:	7	
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:	, , , , , , , ,	
BTOTALS This Period This Page (optional		Outstanding:		

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