

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

| | |
|--|---|
| 1. DATE OF REPORT <u>10/30/16</u> | 2.a. NAME OF CANDIDATE OR COMMITTEE <u>Andy Gilley</u> |
| 2.b. IF COMMITTEE, NAME OF CANDIDATE | 3. ELECTION DATE <u>11/8/16</u> |
| 4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>115 Sugar Maple N</u> <u>Hendersonville</u> <u>TN</u> <u>37075</u> <u>615 604 9165</u> | |
| 4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone | |
| 5. OFFICE SOUGHT (include district number, if applicable) <u>Alderman Ward 4</u> | 6. NAME OF POLITICAL TREASURER (may be candidate) <u>Kevin Pomeroy</u> |
| 7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input type="checkbox"/> PRE-PRIMARY <input checked="" type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL | |
| 8.a. BEGINNING DATE OF REPORTING PERIOD | 8.b. ENDING DATE OF REPORTING PERIOD |
| 9. (Check one) a. <input type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. <input checked="" type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period. | |
| 10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code. <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <u>Andy Gilley</u> signature of candidate </div> <div style="text-align: center;"> <u>10/30/16</u> date </div> <div style="text-align: center;"> <u>[Signature]</u> signature of political treasurer </div> <div style="text-align: center;"> <u>10/31/16</u> date </div> </div> | |
| 11. WITNESS SIGNATURE <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <u>[Signature]</u> signature of witness </div> <div style="text-align: center;"> <u>10/30/16</u> date </div> <div style="text-align: center;"> <u>[Signature]</u> signature of witness </div> <div style="text-align: center;"> <u>10/31/16</u> date </div> </div> | |
| 12. SUMMARY | |
| a. BALANCE ON HAND LAST REPORT | \$ <u>537⁰⁹</u> |
| b. TOTAL RECEIPTS THIS PERIOD | \$ <u>2544⁸⁸</u> |
| c. TOTAL DISBURSEMENTS THIS PERIOD | \$ <u>2718⁴⁸</u> |
| d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) | \$ <u>363⁴⁹</u> |
| e. TOTAL LOANS OUTSTANDING | \$ <u>550⁰⁰</u> |
| f. TOTAL OBLIGATIONS OUTSTANDING | \$ <u>0</u> |

FILED

A.M. P.M.

OCT 31 2016

SUMNER COUNTY
ELECTION COMMISSION



SUMMARY PAGE - CANDIDATE

| | |
|---|--|
| 13. NAME OF CANDIDATE OR COMMITTEE (In Full) <div style="font-size: 1.2em; font-family: cursive;">Andy Gilley</div> | 14. REPORT COVERING THE PERIOD FROM: 10/1/16 TO: 10/29/16 |
| RECEIPTS | |
| 15. CONTRIBUTIONS (other than loans and interest) | |
| a. Unitemized Contributions (\$100 or less from each source this period) | \$ <u>4094⁰⁰</u> |
| b. Itemized Contributions (over \$100 from each source this period) | \$ <u>2050⁰⁰</u> |
| c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) | \$ <u>2544⁰⁰</u> |
| 16. LOANS RECEIVED THIS REPORTING PERIOD | \$ <u>0</u> |
| 17. INTEREST RECEIVED THIS REPORTING PERIOD | \$ <u>0</u> |
| 18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) | \$ <u>2544⁰⁰</u> |
| DISBURSEMENTS | |
| 19. EXPENDITURES (other than loan payments) | |
| a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline) | |
| <u>Homebound Meals Donation</u> | \$ <u>25⁰⁰</u> |
| <u>Bank Fee</u> | \$ <u>30⁰⁰</u> |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| Total of Expenditures (\$100 or less each payee) | \$ <u>55⁰⁰</u> |
| b. Itemized Expenditures (Over \$100 each payee this period) | \$ <u>2263⁴⁸</u> |
| c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) | \$ <u>2318⁴⁸</u> |
| 20. LOAN REPAYMENTS MADE THIS PERIOD | \$ <u>400⁰⁰</u> |
| 21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) | \$ <u>2718⁴⁸</u> |
| 22. IN-KIND CONTRIBUTIONS | |
| a. Unitemized in-kind contributions (\$100 or less from each source this period) | \$ <u>0</u> |
| b. Itemized in-kind contributions (over \$100 from each source this period) | \$ <u>0</u> |
| c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) | \$ <u>0</u> |
| 23. OBLIGATIONS | |
| a. Unitemized Obligations Outstanding (\$100 or less each) | \$ <u>0</u> |
| b. Itemized Obligations Outstanding (Over \$100 each) | \$ <u>0</u> |
| c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) | \$ <u>0</u> |



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

| | | | | | |
|--|--|---|--|--|--------------------------|
| 1. NAME OF CANDIDATE OR COMMITTEE Andy Gilley | | | | 2. REPORT COVERING THE PERIOD FROM: 10/1/16 TO: 10/29/16 | |
| 3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) | | | | | Amount 0 |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor) | | | | | |
| First Name Mitch | | Middle Name | | Contribution Received For: | |
| Last Name/Organization Name Warren | | Address 136 A Hatcher Lane | | <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | |
| City Hendersonville | | State TN | | Zip Code 37075 | |
| Occupation Insurance | | Employer State Farm | | Date of Contribution 10/4/16 | |
| | | | | Amount of Contribution 200⁰⁰ | |
| | | | | Aggregate This Election 200⁰⁰ | |
| First Name Mary | | Middle Name Anne | | Contribution Received For: | |
| Last Name/Organization Name Huggins | | Address 194 Clearview Circle | | <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | |
| City Hendersonville | | State TN | | Zip Code 37075 | |
| Occupation Retired | | Employer Sumner Co Schools | | Date of Contribution 10/5/16 | |
| | | | | Amount of Contribution 200⁰⁰ | |
| | | | | Aggregate This Election 200⁰⁰ | |
| First Name Ben | | Middle Name | | Contribution Received For: | |
| Last Name/Organization Name Hayslip | | Address 2661 Cairo Bend Rd | | <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | |
| City Lebanon | | State TN | | Zip Code 37087 | |
| Occupation Songwriter | | Employer Self | | Date of Contribution 10/17/16 | |
| | | | | Amount of Contribution 1000⁰⁰ | |
| | | | | Aggregate This Election 1000⁰⁰ | |
| First Name James | | Middle Name F | | Contribution Received For: | |
| Last Name/Organization Name McCulloch | | Address 2228 Long Hollow Pike | | <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | |
| City Hendersonville | | State TN | | Zip Code 37075 | |
| Occupation Construction | | Employer Jones Bros | | Date of Contribution 10/24/16 | |
| | | | | Amount of Contribution 400⁰⁰ | |
| | | | | Aggregate This Election 400⁰⁰ | |
| 5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.) | | | | | 1800⁰⁰ |

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

| | | | | | |
|--|--------------------|--------------------------|------------------------------------|--|--|
| 1. NAME OF CANDIDATE OR COMMITTEE Andy Gilley | | | 2. REPORT COVERING THE PERIOD | | |
| | | | FROM: 10/1/16 | TO: 10/29/16 | |
| 3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) | | | Amount 1800⁰⁰ | | |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor) | | | | | |
| First Name Robert | | Middle Name H | | Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | Amount of Contribution 250⁰⁰ |
| Last Name/Organization Name Goodall Jr | | | | | |
| Address 393 Maple St Suite 100 | | | | <input type="checkbox"/> Runoff (Local Elections Only) | |
| City Gallatin | State TN | Zip Code 37066 | | | |
| Occupation Real Estate | | | | Date of Contribution 10/25/16 | Aggregate This Election 250⁰⁰ |
| Employer Goodall Homes | | | | | |
| First Name | | Middle Name | | Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election | Amount of Contribution |
| Last Name/Organization Name | | | | | |
| Address | | | | <input type="checkbox"/> Runoff (Local Elections Only) | |
| City | State | Zip Code | | | |
| Occupation | | | | Date of Contribution | Aggregate This Election |
| Employer | | | | | |
| First Name | | Middle Name | | Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election | Amount of Contribution |
| Last Name/Organization Name | | | | | |
| Address | | | | <input type="checkbox"/> Runoff (Local Elections Only) | |
| City | State | Zip Code | | | |
| Occupation | | | | Date of Contribution | Aggregate This Election |
| Employer | | | | | |
| First Name | | Middle Name | | Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election | Amount of Contribution |
| Last Name/Organization Name | | | | | |
| Address | | | | <input type="checkbox"/> Runoff (Local Elections Only) | |
| City | State | Zip Code | | | |
| Occupation | | | | Date of Contribution | Aggregate This Election |
| Employer | | | | | |
| 5. TOTAL ITEMIZED CONTRIBUTIONS | | | | Amount 2050⁰⁰ | |
| <small>(Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)</small> | | | | | |

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

| | | | | | | | |
|--|--|-------------|--|---|---------------------|-------------------------------|--|
| 1. NAME OF CANDIDATE OR COMMITTEE Andy Gilley | | | | 2. REPORT COVERING THE PERIOD | | | |
| | | | | FROM: 10/1/16 | TO: 10/24/16 | | |
| 3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) | | | | | Amount 0 | | |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period) | | | | | | | |
| First Name | | Middle Name | | In-Kind Contribution Received For: | | Value of In-Kind Contribution | |
| Last Name/Organization Name | | | | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election | | | |
| Address | | | | <input type="checkbox"/> Runoff (Local Elections Only) | | | |
| City | | | | State | | Zip Code | |
| Occupation | | | | Employer | | Date of In-Kind Contribution | |
| | | | | | | Aggregate this Election | |
| Description of In-Kind Contribution | | | | | | | |
| First Name | | Middle Name | | In-Kind Contribution Received For: | | Value of In-Kind Contribution | |
| Last Name/Organization Name | | | | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election | | | |
| Address | | | | <input type="checkbox"/> Runoff (Local Elections Only) | | | |
| City | | | | State | | Zip Code | |
| Occupation | | | | Employer | | Date of In-Kind Contribution | |
| | | | | | | Aggregate this Election | |
| Description of In-Kind Contribution | | | | | | | |
| First Name | | Middle Name | | In-Kind Contribution Received For: | | Value of In-Kind Contribution | |
| Last Name/Organization Name | | | | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election | | | |
| Address | | | | <input type="checkbox"/> Runoff (Local Elections Only) | | | |
| City | | | | State | | Zip Code | |
| Occupation | | | | Employer | | Date of In-Kind Contribution | |
| | | | | | | Aggregate this Election | |
| Description of In-Kind Contribution | | | | | | | |
| First Name | | Middle Name | | In-Kind Contribution Received For: | | Value of In-Kind Contribution | |
| Last Name/Organization Name | | | | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election | | | |
| Address | | | | <input type="checkbox"/> Runoff (Local Elections Only) | | | |
| City | | | | State | | Zip Code | |
| Occupation | | | | Employer | | Date of In-Kind Contribution | |
| | | | | | | Aggregate this Election | |
| Description of In-Kind Contribution | | | | | | | |
| First Name | | Middle Name | | In-Kind Contribution Received For: | | Value of In-Kind Contribution | |
| Last Name/Organization Name | | | | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election | | | |
| Address | | | | <input type="checkbox"/> Runoff (Local Elections Only) | | | |
| City | | | | State | | Zip Code | |
| Occupation | | | | Employer | | Date of In-Kind Contribution | |
| | | | | | | Aggregate this Election | |
| Description of In-Kind Contribution | | | | | | | |
| 5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS | | | | | | | |
| (Carry forward to item 3. of next page if additional pages of this form are used.) | | | | | 0 | | |
| (If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.) | | | | | | | |

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

| | | | | | |
|--|-----------|------------------------------|-------------------------------|----------------------------|--------------------------|
| 1. NAME OF CANDIDATE OR COMMITTEE Andy Gilley | | | 2. REPORT COVERING THE PERIOD | | |
| | | | FROM: 10/1/14 | TO: 10/29/14 | |
| 3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) | | | Amount 0 | | |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period) | | | | | |
| First Name | | Middle Name | | Purpose of Expenditure | Amount of Expenditure |
| Last Name/Business Name | | Address | | Campaign Management | 500⁰⁰ |
| Subversive LLC | | Hazel Path | | | |
| City | State | Zip Code | | | |
| Hendersonville | TN | 37075 | | | |
| First Name | | Middle Name | | Purpose of Expenditure | Amount of Expenditure |
| Last Name/Business Name | | Address | | Yard Signs | 513⁴⁸ |
| Mr Sign Man | | 29 Industrial Park Dr | | | |
| City | State | Zip Code | | | |
| Hendersonville | TN | 37075 | | | |
| First Name | | Middle Name | | Purpose of Expenditure | Amount of Expenditure |
| Last Name/Business Name | | Address | | Campaign Mailers | 1250⁰⁰ |
| Subversive LLC | | Hazel Path | | | |
| City | State | Zip Code | | | |
| Hendersonville | TN | 37075 | | | |
| First Name | | Middle Name | | Purpose of Expenditure | Amount of Expenditure |
| Last Name/Business Name | | Address | | | |
| City | | State | | Zip Code | |
| First Name | | Middle Name | | Purpose of Expenditure | Amount of Expenditure |
| Last Name/Business Name | | Address | | | |
| City | | State | | Zip Code | |
| First Name | | Middle Name | | Purpose of Expenditure | Amount of Expenditure |
| Last Name/Business Name | | Address | | | |
| City | | State | | Zip Code | |
| 5. TOTAL ITEMIZED EXPENDITURES (Carry forward to Item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.) | | | | | 2263⁴⁸ |

ITEMIZED STATEMENT OF LOANS - CANDIDATE

| | | | | | | | | | |
|---|--|--------------------|--------------------------|---|---|----------------------------|--|---|--|
| 1. NAME OF CANDIDATE OR COMMITTEE Andy Gilley | | | | 2. REPORT COVERING THE PERIOD FROM: 10/1/16 TO: 10/29/16 | | | | | |
| 3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period) | | | | | | | | | |
| Complete the Following for the Source of the Loan | | | | | | | | | |
| First Name Andy | | Middle Name | | Outstanding Loan Balance (Beginning of Period) 950⁰⁰ | | Loans Received 0 | Loan Payments 400⁰⁰ | Outstanding Loan Balance (End of Period) 550⁰⁰ | |
| Last Name/Organization Name Gilley | | | | Address 115 Sugar Maple N | | | | Date of Loan | |
| City Hendersonville | | State TN | Zip Code 37075 | | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only) | | | | |
| List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page) | | | | | | | | | |
| First Name | | Middle Name | | First Name | | Middle Name | | | |
| Last Name/Organization Name | | | | Last Name/Organization Name | | | | | |
| Address | | | | Address | | | | | |
| City | | State | Zip Code | | City | | State | Zip Code | |
| Amount Guaranteed Outstanding | | | | Amount Guaranteed Outstanding | | | | | |
| First Name | | Middle Name | | First Name | | Middle Name | | | |
| Last Name/Organization Name | | | | Last Name/Organization Name | | | | | |
| Address | | | | Address | | | | | |
| City | | State | Zip Code | | City | | State | Zip Code | |
| Amount Guaranteed Outstanding | | | | Amount Guaranteed Outstanding | | | | | |
| First Name | | Middle Name | | First Name | | Middle Name | | | |
| Last Name/Organization Name | | | | Last Name/Organization Name | | | | | |
| Address | | | | Address | | | | | |
| City | | State | Zip Code | | City | | State | Zip Code | |
| Amount Guaranteed Outstanding | | | | Amount Guaranteed Outstanding | | | | | |
| First Name | | Middle Name | | First Name | | Middle Name | | | |
| Last Name/Organization Name | | | | Last Name/Organization Name | | | | | |
| Address | | | | Address | | | | | |
| City | | State | Zip Code | | City | | State | Zip Code | |
| Amount Guaranteed Outstanding | | | | Amount Guaranteed Outstanding | | | | | |
| 4. Totals for all Loans (complete on last page of itemized loans) | | | | Outstanding Loan Balance (Beginning of Period) | Loans Received | Loan Payments | Outstanding Loan Balance (End of Period) | | |
| (Total loans received should also be shown in item 16. on summary page.) | | | | 950⁰⁰ | 0 | 400⁰⁰ | 550⁰⁰ | | |
| (Total loan payments should also be shown in item 20. on summary page.) | | | | | | | | | |
| (Total outstanding loan balance should also be shown in item 12.e. on front page.) | | | | | | | | | |



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

| 1. NAME OF CANDIDATE OR COMMITTEE | | | 2. REPORT COVERING THE PERIOD | | | | | | | | | | | | |
|---|---|---------------------------|-------------------------------|-------------------------------------|---------------------|--|------|-------------------|---------------------------|--|--|--|--|--|--|
| <i>Andy Gilley</i> | | | FROM: <i>10/1/16</i> | | TO: <i>10/29/16</i> | | | | | | | | | | |
| 3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period) | Outstanding Balance (Beginning of Period) | Debt Incurred This Period | Payments This Period | Outstanding Balance (End of Period) | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">First Name</td> <td>Middle Name</td> </tr> <tr> <td colspan="2">Last Name/Business Name</td> </tr> <tr> <td colspan="2">Address</td> </tr> <tr> <td>City</td> <td>State Zip Code</td> </tr> <tr> <td colspan="2">Description of Obligation</td> </tr> </table> | First Name | Middle Name | Last Name/Business Name | | Address | | City | State Zip Code | Description of Obligation | | | | | | |
| First Name | Middle Name | | | | | | | | | | | | | | |
| Last Name/Business Name | | | | | | | | | | | | | | | |
| Address | | | | | | | | | | | | | | | |
| City | State Zip Code | | | | | | | | | | | | | | |
| Description of Obligation | | | | | | | | | | | | | | | |
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| First Name | Middle Name | | | | | | | | | | | | | | |
| Last Name/Business Name | | | | | | | | | | | | | | | |
| Address | | | | | | | | | | | | | | | |
| City | State Zip Code | | | | | | | | | | | | | | |
| Description of Obligation | | | | | | | | | | | | | | | |
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| First Name | Middle Name | | | | | | | | | | | | | | |
| Last Name/Business Name | | | | | | | | | | | | | | | |
| Address | | | | | | | | | | | | | | | |
| City | State Zip Code | | | | | | | | | | | | | | |
| Description of Obligation | | | | | | | | | | | | | | | |
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| First Name | Middle Name | | | | | | | | | | | | | | |
| Last Name/Business Name | | | | | | | | | | | | | | | |
| Address | | | | | | | | | | | | | | | |
| City | State Zip Code | | | | | | | | | | | | | | |
| Description of Obligation | | | | | | | | | | | | | | | |
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| First Name | Middle Name | | | | | | | | | | | | | | |
| Last Name/Business Name | | | | | | | | | | | | | | | |
| Address | | | | | | | | | | | | | | | |
| City | State Zip Code | | | | | | | | | | | | | | |
| Description of Obligation | | | | | | | | | | | | | | | |
| 4. TOTALS (Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.) | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | | | | | | | | | | | |