



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/31/2026 2.a. Candidate or Committee Name: Dedriene Rogers
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
4. Campaign Address: 2248 Stovall Avenue
City: Memphis State: TN Zip Code: 38108 Phone: 9016112277
5. Candidate Home Address: 2248 Stovall Avenue
City: Memphis State: TN Zip Code: 38108 Phone: 9013312260
Candidate Email Address: dr.rogers@electdedrienerogers.org
6. Office Sought: (include district number, if applicable) Shelby County Commissioner, Dist. 7
7. Name of Political Treasurer (may be candidate): Tangle Richmond-Duckett
Political Treasurer Email Address: tangela@electdedrienerogers.org
8. Category or Report: (check one)
☐ First Quarter ☐ Second Quarter ☐ Third Quarter ☐ Fourth Quarter ☒ Pre-Primary ☐ Pre-General
☐ Mid-Year Supplemental ☐ Year-End Supplemental ☐ Runoff Election
9. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
10. Detailed Disclosure: (Check one)
☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)
☒ 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.
11. 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.

Candidate Signature	Date	Political Treasurer Signature	Date
_____	_____	_____	_____
Witness Signature	Date	Witness Signature	Date
_____	_____	_____	_____

12. Summary:

a. Balance On Hand Last Report	\$ <u>152.44</u>
b. Total Receipts This Period	\$ <u>23,182.53</u>
c. Total Disbursements This Period	\$ <u>18,912.70</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>4,422.27</u>
e. Total Loans Outstanding	\$ <u>10,000.00</u>
f. Total Obligations Outstanding	\$ <u>0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Dedriene Rogers

14. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ \$2,000.00
(Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000. See *Instructions* for more information.)
- b. Itemized Contributions (over \$100 from each source this period) \$ \$11,182.53
- c. Loans Received This Reporting Period..... \$ \$10,000.00
- d. Interest Received This Reporting Period \$ _____
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ \$23,182.53

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$18,912.70
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ _____
- c. Total Obligation Payments Made This Period..... \$ _____
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ \$18,912.70

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ _____
- c. Total In-Kind Contributions Received This Period \$ _____

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ _____

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Dedriene Rogers
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Dorsey Middle Name: _____ Last Name: Hobson
Address: 186 S Belvedere Blve City: Memphs State: TN Zip Code: 38104
Occupation: Partner Employer: City Fund
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 4/7/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: LEE Foundation **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 800 North King Street Suite 304-4 City: Wilmington State: DE Zip Code: 19801
Occupation: Civic Org Employer: LEE
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$2,000.00 Date of Contribution: 4/10/2026 Aggregate This Election: \$ \$3,000.00

Business or Organization Name: _____ **OR**
First Name: Lula Middle Name: _____ Last Name: Pharr
Address: 2171 Stovall Avenue City: Memphis State: TN Zip Code: 38108
Occupation: Mail Carrier Employer: USPS
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 4/11/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: Tamika Middle Name: _____ Last Name: Johnson
Address: 5649 Grove Lane City: Horn Lake State: MS Zip Code: 38637
Occupation: Manager Employer: AT&T
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$150.00 Date of Contribution: 4/14/2026 Aggregate This Election: \$ \$150.00

Total Contributions: \$ \$2,650.00
(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Dedriene Rogers
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,650.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Harold Carruthers **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2442 Summer Avenue City: Memphis State: TN Zip Code: 38112
Occupation: Owner Employer: Dixie Queen
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 4/25/2026 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: Karen Carruthers **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1680 Martha Drive City: Memphis State: TN Zip Code: 38127
Occupation: Manager Employer: Dixie Queen
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 4/1/2026 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: Troy Robinson **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1050 Springdale City: Memphis State: TN Zip Code: 38108
Occupation: Employee Employer: Memphis Rise
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 4/12/2026 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: Brian Winford **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5446 Bristol Meadow Cove City: Memphis State: TN Zip Code: 38125
Occupation: Entrepreneur Employer: Self-Employed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 4/22/2026 Aggregate This Election: \$ \$1,900.00

Total Contributions: \$ \$10,250.00
(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Dedriene Rogers
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$10,250.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Antawan Ingram **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1485 Maplewood City: Memphis State: TN Zip Code: 38108

Occupation: Entrepreneur Employer: Self- Employed

Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ \$932.53 Date of Contribution: 4/12/2026 Aggregate This Election: \$ \$932.53

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$ \$11,182.53

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Dedriene Rogers
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Metro Printing **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 3840 Robinson Road City: Jackson State: MS Zip Code: 39204

Purpose of Expenditure: Campaign Literature

Amount of Expenditure: \$ \$3,578.00 Date of Expenditure: \$ 4/1/2026

Business or Organization Name: Winbush Firehouse Productions **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 143 Nelson Street City: Ripley State: TN Zip Code: 38063

Purpose of Expenditure: Public Relations

Amount of Expenditure: \$ \$200.00 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: WLOK Radio **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 363 2nd Street City: Memphis State: TN Zip Code: 38103

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$450.00 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: Shelby County Democratic Party **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: P.O. Box 40864 City: Memphis State: TN Zip Code: 38104

Purpose of Expenditure: Vendor Fee

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 4/7/2026

Business or Organization Name: Comelia Walker, LLC **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 539 King Ranch Road City: Canton State: MS Zip Code: 39046

Purpose of Expenditure: Campaign Strategist

Amount of Expenditure: \$ \$1,000.00 Date of Expenditure: \$ 4/15/2026

Total Expenditures: \$ \$5,328.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Dedriene Rogers
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$5,328.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: H&K Prints Co **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 3436 Park Avenue City: Memphis State: TN Zip Code: 38111

Purpose of Expenditure: Campaign Material

Amount of Expenditure: \$ \$742.85 Date of Expenditure: \$ 4/11/2026

Business or Organization Name: Bam Bam **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: P.O. Box 1221 City: Cordova State: TN Zip Code: 38088

Purpose of Expenditure: Canvassing

Amount of Expenditure: \$ \$1,280.00 Date of Expenditure: \$ 4/11/2026

Business or Organization Name: Wildfire Contact LLC **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 221 Main Street Suite 1550 City: San Fransico State: CA Zip Code: 94105

Purpose of Expenditure: Campaign Grassroots

Amount of Expenditure: \$ \$772.40 Date of Expenditure: \$ 4/15/2026

Business or Organization Name: D Bounce **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: Mobile City: Memphis State: TN Zip Code: 38108

Purpose of Expenditure: Campaign Entertainment

Amount of Expenditure: \$ \$1,420.42 Date of Expenditure: \$ 4/13/2026

Business or Organization Name: Texting For Less **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 354 State Street City: Hackensack State: NJ Zip Code: 07601

Purpose of Expenditure: Campaign Grassroots

Amount of Expenditure: \$ \$65.03 Date of Expenditure: \$ 4/20/2026

Total Expenditures: \$ \$9,608.70

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Dedriene Rogers
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$9,608.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Kona Ice **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Mobile City: Memphis State: TN Zip Code: 38108
Purpose of Expenditure: Campaign Refreshments
Amount of Expenditure: \$ \$600.00 Date of Expenditure: \$ 4/25/2026

Business or Organization Name: Dixie Queen **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 844 Poplar Avenue City: Memphis State: TN Zip Code: 38105
Purpose of Expenditure: Campaign Refreshments
Amount of Expenditure: \$ \$664.00 Date of Expenditure: \$ 4/11/2026

Business or Organization Name: Timothy Jones **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2771 North Lakeshore Drive City: Memphis State: TN Zip Code: 38127
Purpose of Expenditure: Campaign Refreshments
Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 4/23/2026

Business or Organization Name: Nard Productions **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 15 Blackthorn Cove City: Oakland State: TN Zip Code: 38060
Purpose of Expenditure: Public Relations
Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 4/25/2026

Business or Organization Name: Fedex Kinkos **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4625 Summer Avenue City: Memphis State: TN Zip Code: 38122
Purpose of Expenditure: Campaign Literature
Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 4/15/2026

Total Expenditures: \$ \$11,622.70

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Dedriene Rogers
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$11,622.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Catherine Baker **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3737 Helmwood Street City: Memphis State: TN Zip Code: 38127
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$1,240.00 Date of Expenditure: \$ 4/25/2026

Business or Organization Name: Jamela Holmes **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2533 Goodwill Lane APt 2 City: Memphis State: TN Zip Code: 38108
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$1,240.00 Date of Expenditure: \$ 4/25/2026

Business or Organization Name: Evelyn Stone Bailey **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2830 Summit Arbors Circle Unit3 City: Memphis State: TN Zip Code: 38128
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$1,240.00 Date of Expenditure: \$ 4/25/2026

Business or Organization Name: Tajerrian Carson **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1050 Springdale City: Memphis State: TN Zip Code: 38108
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$340.00 Date of Expenditure: \$ 4/18/2026

Business or Organization Name: Connie Fulton **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3450 East Rolling Woods City: Memphis State: TN Zip Code: 38128
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$900.00 Date of Expenditure: \$ 4/25/2026

Total Expenditures: \$ \$16,582.70

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Dedriene Rogers
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$16,582.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Emmanuel Stokes OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1633 Penns Street Apt 132 City: Memphis State: TN Zip Code: 38109

Purpose of Expenditure: Poll Worker

Amount of Expenditure: \$ \$490.00 Date of Expenditure: \$ 4/18/2026

Business or Organization Name: Philanda Carr OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 3093 North Watkins City: Memphis State: TN Zip Code: 38127

Purpose of Expenditure: Poll Worker

Amount of Expenditure: \$ \$340.00 Date of Expenditure: \$ 4/18/2026

Business or Organization Name: Venus Britton OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 411 Leath Street City: Memphis State: TN Zip Code: 38105

Purpose of Expenditure: Poll Worker

Amount of Expenditure: \$ \$750.00 Date of Expenditure: \$ 4/25/2026

Business or Organization Name: Shenika Shells OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 3616 Voltare Avenue City: Memphis State: TN Zip Code: 38105

Purpose of Expenditure: Poll Worker

Amount of Expenditure: \$ \$750.00 Date of Expenditure: \$ 4/25/2026

Business or Organization Name: _____ OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: _____

Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Total Expenditures: \$ \$18,912.70

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Dedriene Rogers
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: _____ **OR**

First Name: Dedriene Middle Name: _____ Last Name: Rogers

Address: 2248 Stovall Avenue City: Memphis State: TN Zip Code: 38108

Outstanding Loan Balance (Beginning) \$ \$0.00

Loans Received \$ \$10,000.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$10,000.00

Loan Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

Date of Loan: 4/13/2026

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Amount Guaranteed Outstanding: \$ _____

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans.)

Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) \$ \$0.00

Loans Received \$ \$10,000.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$10,000.00