



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 4/10/26 2.a. Candidate or Committee Name: Lashanta Budd County Commission D10
 2.b. If Committee, Name of Candidate: _____ 3. Election Date: _____
 4. Campaign Address: 1200 David St
 City: Memphis State: TN Zip Code: 38114 Phone: 901-609-8683
 5. Candidate Home Address: 1200 David St
 City: Memphis State: TN Zip Code: 38114 Phone: 901-609-8683
 Candidate Email Address: vote.lashanta.rudd10@gmail.com
 6. Office Sought: (include district number, if applicable) County Commission D10
 7. Name of Political Treasurer (may be candidate): Lashanta Budd
 Political Treasurer Email Address: vote.lashanta.rudd10@gmail.com

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: 1/10/26 End Date: 3/31/26

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.

	<u>4/10/26</u>		<u>4/10/26</u>
Candidate Signature	Date	Political Treasurer Signature	Date
	<u>4/10/26</u>		<u>4/10/26</u>
Witness Signature	Date	Witness Signature	Date

12. Summary:

a. Balance On Hand Last Report	\$	<u>124.23</u>
b. Total Receipts This Period	\$	<u>1240.00</u>
c. Total Disbursements This Period	\$	<u>1153.00</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$	<u>211.23</u>
e. Total Loans Outstanding	\$	<u>0</u>
f. Total Obligations Outstanding	\$	<u>0</u>

SUMMARY PAGE - CANDIDATE

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13. Name of Candidate or Committee: Lashanta Rucld for County Commission D-10

14. Reporting Period: Start Date: 1/16/26 End Date: 3/31/26

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 790
(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) \$ 450
- c. Loans Received This Reporting Period..... \$ 0
- d. Interest Received This Reporting Period \$ 0
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 1240

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 1153.00
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ 0
- c. Total Obligation Payments Made This Period..... \$ 0
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ 1153.00

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ 0
- b. Itemized In-Kind Contributions Received This Period \$ 500.00
- c. Total In-Kind Contributions Received This Period \$ 500.00

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ 0

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ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

- Candidate or Committee Name: Lashonda Budd for County Commissioner D10
- Reporting Period: Start Date: 1/16/26 End Date: 3/31/26
- Total campaign contributions from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR

First Name: Ashonte Middle Name: _____ Last Name: Howard

Address: 950 Hamilton City: Memphis State: TN Zip Code: 38114

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 20.00 Date of Contribution: 1/16/26 Aggregate This Election: \$ 20

Business or Organization Name: _____ OR

First Name: Glenda Middle Name: _____ Last Name: Hicks

Address: 3090 Woodbury City: Memphis State: TN Zip Code: 38134

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 100.00 Date of Contribution: 2/6/26 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ OR

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

Address: 130 South Front St City: Memphis State: TN Zip Code: 38107

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 10.00 Date of Contribution: 2/6/26 Aggregate This Election: \$ 10

Business or Organization Name: Auto America 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: \$ 300.00 Date of Contribution: 2/8/26 Aggregate This Election: \$ 300.00

Total Contributions: \$ 430.00

(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.)

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ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Lashonda Lucel for County Commission D10
 2. Reporting Period: Start Date: 1/16/26 End Date: 3/31/26
 3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 430.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
 First Name: Janet Middle Name: _____ Last Name: McClora
 Address: _____ City: _____ State: _____ Zip Code: _____
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 25.00 Date of Contribution: 2/19/26 Aggregate This Election: \$ 25.00

Business or Organization Name: _____ OR
 First Name: Sara Middle Name: _____ Last Name: Carpenter
 Address: _____ City: _____ State: _____ Zip Code: _____
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 100.00 Date of Contribution: 2/19/26 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ OR
 First Name: Adrienne Middle Name: _____ Last Name: Davis
 Address: 4911 Helene Ln City: Memphis State: TN Zip Code: 38117
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 50.00 Date of Contribution: 2/21/26 Aggregate This Election: \$ 50.00

Business or Organization Name: _____ OR
 First Name: Connie Middle Name: _____ Last Name: Davis
 Address: 1437 Albany Dr. City: Shelby County State: TN Zip Code: 38016
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 50.00 Date of Contribution: 2/29/26 Aggregate This Election: \$ 50.00

Total Contributions: \$ 225.00

(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.)

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ITEMIZED STATEMENT OF CONTRIBUTIONS CANDIDATE

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- 1. Candidate or Committee Name: Lashanta Ludd for County Commission D-10-102
- 2. Reporting Period: Start Date: 1/1/26 End Date: 3/31/26
- 3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 225.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR

First Name: Ashante Middle Name: _____ Last Name: Howard

Address: _____ City: Memphis State: TN Zip Code: 38114

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 80.00 Date of Contribution: 2/26/26 Aggregate This Election: \$ 20

Business or Organization Name: Nena Anderson Law Office OR

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

Address: _____ City: Memphis State: TN Zip Code: 38114

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 150.00 Date of Contribution: 3/7/26 Aggregate This Election: \$ 150.00

Business or Organization Name: _____ OR

First Name: Dawn Middle Name: _____ Last Name: Shoats

Address: 2135 Langdon Dr City: Memphis State: TN Zip Code: 38126

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 50.00 Date of Contribution: 3/14/26 Aggregate This Election: \$ 50.00

Business or Organization Name: _____ OR

First Name: Artene Middle Name: _____ Last Name: Fiber

Address: _____ City: Memphis State: TN Zip Code: 38114

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 50.00 Date of Contribution: 3/15/26 Aggregate This Election: \$ 50.00

Total Contributions: \$ 270.00

(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.)

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ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

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- Candidate or Committee Name: Leshanta Rudeb County Commission D-10
- Reporting Period: Start Date: 1/16/26 End Date: 3/31/26
- Total campaign contributions from preceding page (enter \$0 if first page) \$ 270.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
 First Name: Chanteray Middle Name: _____ Last Name: Knox
 Address: _____ City: Memphis State: TN Zip Code: 38125
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 50.00 Date of Contribution: 3/10/26 Aggregate This Election: \$ 50.00

Business or Organization Name: _____ OR
 First Name: Kierra Middle Name: _____ Last Name: Mills
 Address: 3363 Ridgeway Rd City: Memphis State: TN Zip Code: 38115
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 40.00 Date of Contribution: 3/18/26 Aggregate This Election: \$ 40.00

Business or Organization Name: _____ OR
 First Name: Alicia Middle Name: _____ Last Name: Tucker
 Address: 6607 Winding Birch City: Memphis State: TN Zip Code: 38115
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 10.00 Date of Contribution: 3/18/26 Aggregate This Election: \$ 10.00

Business or Organization Name: Kedro OR
 First Name: Kedro Middle Name: _____ Last Name: Windo
 Address: _____ City: _____ State: _____ Zip Code: _____
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 5.00 Date of Contribution: 3/18 Aggregate This Election: \$ 5.00

Total Contributions: \$ 105.00

(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.)

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ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Leshaunta Rudder for County Commission D-10
 2. Reporting Period: Start Date: 1/14/26 End Date: 3/31/26
 3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 100.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
 First Name: Odela Middle Name: _____ Last Name: Hodges
 Address: _____ City: _____ State: _____ Zip Code: _____
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 50.00 Date of Contribution: 3/21/26 Aggregate This Election: \$ 50.00

Business or Organization Name: _____ OR
 First Name: Maneesha Middle Name: _____ Last Name: Owens
 Address: _____ City: mphs State: TN Zip Code: 38114
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 100.00 Date of Contribution: 3/24/26 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ OR
 First Name: Ashontae Middle Name: _____ Last Name: _____
 Address: 950 Hamilton City: mphs State: TN Zip Code: 38111
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 40.00 Date of Contribution: 3/26/26 Aggregate This Election: \$ 40.00

Business or Organization Name: _____ OR
 First Name: Caroline Middle Name: _____ Last Name: Higgins
 Address: _____ City: mphs State: TN Zip Code: 38111
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 20.00 Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$ 210

(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: Lashanka Rudd for County Commissioner D10
- 2. Reporting Period: Start Date: 1/14/26 End Date: 3/31/26
- 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: First Horizon Bank OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Monthly Bank fee
 Amount of Expenditure: \$ 3.00 Date of Expenditure: 1/30/26

Business or Organization Name: Vista Point OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Campaign Flyers
 Amount of Expenditure: \$ 111.93 Date of Expenditure: 1/20/26

Business or Organization Name: LTG Custom Printing OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Campaign Signs
 Amount of Expenditure: \$ 353.00 Date of Expenditure: 2/15/26

Business or Organization Name: Mobile Texting OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Campaign Texting
 Amount of Expenditure: \$ 25.00 Date of Expenditure: 2/9/26

Business or Organization Name: Super 10 OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Volunteers Snacks & Beverages
 Amount of Expenditure: \$ 57.10 Date of Expenditure: 2/17/26

Total Expenditures: \$ 550.03

(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: Lashaka Ludd for Candy Commission D10
 2. Reporting Period: Start Date: 1/14/26 End Date: 3/31/26
 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 550.03

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: Direct 7X OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Campaign Signs
 Amount of Expenditure: \$ 500.00 Date of Expenditure: 2/07/26

Business or Organization Name: First Horizon Bank OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: monthly Bank fee
 Amount of Expenditure: \$ 3.00 Date of Expenditure: 2/27/26

Business or Organization Name: LTE Custom Printing OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Campaign Signs
 Amount of Expenditure: \$ 100.00 Date of Expenditure: 2/27/26

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: _____

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: \$ 603.00

(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 IN-KIND CONTRIBUTIONS - CANDIDATE

- 1. Candidate or Committee Name: Joshua Ridd for County Commissioner D10
- 2. Reporting Period: Start Date: 1/16/26 End Date: 3/3/26
- 3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars (\$100) from any contributor during the period must be reported.

Business or Organization Name: VTP Automotives OR

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

Address: 1800 Elvis Presley City: Memphis State: TN Zip Code: 38106

Occupation: _____ Employer: _____

In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

In-Kind Contribution Value: \$ 500.00 In-Kind Contribution Date: 3/19/26 Aggregate This Election: \$ 500.00

Description of In-Kind Contribution: Purchased Campaign Signs Direct FX

Business or Organization Name: _____ OR

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

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

Occupation: _____ Employer: _____

In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

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

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

Occupation: _____ Employer: _____

In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

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

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

Occupation: _____ Employer: _____

In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ 500.00

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

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ITEMIZED STATEMENT OF LOANS - CANDIDATE

- 1. Candidate or Committee Name: Ushanta Ridd for County Commission P-10
- 2. Reporting Period: Start Date: 1/14/24 End Date: 3/31/24
- 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: _____ Middle Name: _____ Last Name: _____

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

Outstanding Loan Balance (Beginning) \$ _____

Loans Received \$ _____

Loan Payments \$ _____

Outstanding Loan (End)..... \$ _____

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

Date of Loan: _____

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) \$ _____

Loans Received \$ _____


Loan Payments \$ _____

Outstanding Loan (End)..... \$ _____

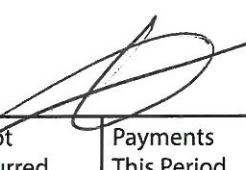
ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

- Candidate or Committee Name: Lashonta Budd for County Commission D-10
- Reporting Period: Start Date: 1/10/26 End Date: 3/31/26
- Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

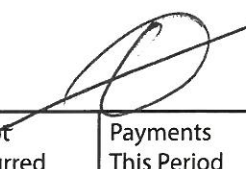
Business Name: _____
 First Name: _____ Middle Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

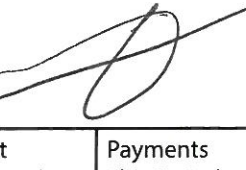
Business Name: _____
 First Name: _____ Middle Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: _____
 First Name: _____ Middle Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____ Zip Code: _____

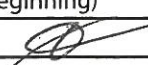

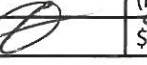
Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: _____
 First Name: _____ Middle Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

TOTALS

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding Balance (Period Beginning)	Debt Incurred	Payments This Period	Outstanding Balance (Period End)
\$ 	\$ 	\$ 	\$ 