



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1st Qtr
AMENDED

1. Date: 6-29-26 2.a. Candidate or Committee Name: Friends of Cheryl Brown
- 2.b. If Committee, Name of Candidate: Cheryl Brown 3. Election Date: 5-5-26
4. Campaign Address: 500 Kilburn Ct
City: Franklin State: TN Zip Code: 37067 Phone: 615.870.6188
5. Candidate Home Address: 500 Kilburn Ct
City: Franklin State: TN Zip Code: 37067 Phone: 615.870.6188
Candidate Email Address: cheryl@gop23@gmail.com
6. Office Sought: (include district number, if applicable) Williamson County Commissioner District 10
7. Name of Political Treasurer (may be candidate): Judy A Oxford
Political Treasurer Email Address: judyaxford@comcast.net
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: 1-23-2026 End Date: 3-31-2026

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.

[Signature] 7/2/26
Candidate Signature Date

[Signature] 7-2-26
Witness Signature Date

Judy A Oxford 7-2-26
Political Treasurer Signature Date

[Signature] 7-2-26
Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	\$	_____
b. Total Receipts This Period	\$	<u>4,898.26</u>
c. Total Disbursements This Period	\$	<u>1,579.51</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$	<u>3,318.75</u>
e. Total Loans Outstanding	\$	<u>0</u>
f. Total Obligations Outstanding	\$	<u>285.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Friends of Cheryl Brown

14. Reporting Period: Start Date: 1-23-2026 End Date: 3-31-2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 154.80
(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) \$ 4,743.46
- 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.) \$ 4,898.26

16. Disbursements:

- a. Total Expenditures (other than loan payments) \$ 1,579.51
(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.) \$ 1,579.51

17. In-Kind Contributions: Amended

- a. Unitemized In-Kind Contributions Received This Period \$ 0
- b. Itemized In-Kind Contributions Received This Period \$ 466.21
- c. Total In-Kind Contributions Received This Period \$ 466.21

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ 285.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Friends of Cheryl Brown
2. Reporting Period: Start Date: 1-23-2026 End Date: 3-31-2026
3. 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: Raja Middle Name: _____ Last Name: OBrien
Address: 5021 Country Club Dr. City: Brentwood State: TN Zip Code: 37027
Occupation: homemaker Employer: _____
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 150.00 Date of Contribution: 2-26-2026 Aggregate This Election: \$ 150.00

Business or Organization Name: Jack Pac OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 915 Lewisburg Pk City: Franklin State: TN Zip Code: 37064
Occupation: _____ Employer: _____
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 2-21-2026 Aggregate This Election: \$ 500.00

Business or Organization Name: _____ OR
First Name: Kelly Middle Name: _____ Last Name: Beasley
Address: 4440 Peytonsville Rd. City: Franklin State: TN Zip Code: 37064
Occupation: real estate development Employer: self
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 3-11-26 Aggregate This Election: \$ 250.00

Business or Organization Name: _____ OR
First Name: Betsy Middle Name: _____ Last Name: Hester
Address: 112 Valley Ridge Rd City: Franklin State: TN Zip Code: 37064
Occupation: commissioner Employer: Williamson County Government
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 400.00 Date of Contribution: 3-17-2026 Aggregate This Election: \$ 400.00

Total Contributions: \$ 1,300.00

(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: Friends of Cheryl Brown
2. Reporting Period: Start Date: 1-23-2026 End Date: 3-31-2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1,300.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Dawn Middle Name: _____ Last Name: Mountain
Address: 226 Sontag Dr City: Franklin State: TN Zip Code: 37064
Occupation: retired Employer: retired
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 104.48 Date of Contribution: 2-9-2026 Aggregate This Election: \$ 104.48

Business or Organization Name: _____ OR
First Name: Jeff Middle Name: _____ Last Name: Moseley
Address: 204 Kaitlyn Ct City: Franklin State: TN Zip Code: 37067
Occupation: attorney Employer: Buerger, Moseley & Carson
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 104.48 Date of Contribution: 2-17-26 Aggregate This Election: \$ 104.48

Business or Organization Name: _____ OR
First Name: Julie Middle Name: Hannah Last Name: Beaman
Address: 837 Glen Leven Dr City: Nashville State: TN Zip Code: 37204
Occupation: retired Employer: retired
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1,041.98 Date of Contribution: 3-15-2026 Aggregate This Election: \$ 1,041.98

Business or Organization Name: _____ OR
First Name: Ken Middle Name: _____ Last Name: Moore
Address: 725 W. Main St. Apt 202 City: Franklin State: TN Zip Code: 37064
Occupation: elected official Employer: City of Franklin
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 208.65 Date of Contribution: 3-16-2026 Aggregate This Election: \$ 208.65

Total Contributions: \$ 2,759.59

(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: Friends of Cheryl Brown
2. Reporting Period: Start Date: 1-23-2026 End Date: 3-31-2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 2,759.59

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Karen Middle Name: _____ Last Name: Paris
Address: 111 Churchill Pl City: Franklin State: IN Zip Code: 37067
Occupation: County Trustee Employer: Williamson Co Government
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 104.48 Date of Contribution: 3-22-2026 Aggregate This Election: \$ 104.48

Business or Organization Name: _____ OR
First Name: Kurt Middle Name: _____ Last Name: Winstead
Address: 100 Pebble Beach Dr City: Franklin State: TN Zip Code: 37069
Occupation: attorney Employer: self-employed
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 260.73 Date of Contribution: 3-25-26 Aggregate This Election: \$ 260.73

Business or Organization Name: _____ OR
First Name: Reba Middle Name: R Last Name: McCalmon
Address: 5205 Still House Hollow Rd City: Franklin State: TN Zip Code: 37064
Occupation: retired Employer: retired
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 3-17-2026 Aggregate This Election: \$ 500.00

Business or Organization Name: Re-Elect Rogers C Anderson OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1108 Dorris Ct City: Franklin State: TN Zip Code: 37069
Occupation: _____ Employer: _____
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 3-26-2026 Aggregate This Election: \$ 500.00

Total Contributions: \$ 4,124.80

(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: Friends of Cheryl Brown
2. Reporting Period: Start Date: 1-23-2026 End Date: 3-31-26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 4,124.80

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Cheryl Middle Name: _____ Last Name: Brown
Address: 500 Kilburn Ct City: Franklin State: TN Zip Code: 37067
Occupation: chief executive Employer: self-employed
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 1-23-2026 Aggregate This Election: \$ 318.66

Business or Organization Name: _____ OR
First Name: Cheryl Middle Name: _____ Last Name: Brown
Address: 500 Kilburn Ct City: Franklin State: TN Zip Code: _____
Occupation: chief executive Employer: self-employed
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 218.66 Date of Contribution: 2-9-2026 Aggregate This Election: \$ 318.66

Business or Organization Name: _____ OR
First Name: Andrea Middle Name: N Last Name: Pareigis
Address: 1009 Cedarview Lane City: Franklin State: TN Zip Code: 37067
Occupation: CEO Employer: The Drury Group
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 300.00 Date of Contribution: 3-30-26 Aggregate This Election: \$ 300.00

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: \$ 4,743.46

(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.)

Amended

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Friends of Cheryl Brown
2. Reporting Period: Start Date: 1-23-2026 End Date: 3-31-2026
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: Mettle 5, LLC OR

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

Address: PO Box 623 City: Franklin State: TN Zip Code: 37065

Occupation: _____ Employer: _____

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

In-Kind Contribution Value: \$ 250.00 In-Kind Contribution Date: _____ Aggregate This Election: \$ 250.00

Description of In-Kind Contribution: campaign website and email assistance

Business or Organization Name: _____ OR

First Name: LeiAnn Middle Name: _____ Last Name: Gleaves

Address: 100 Sontag Dr City: Franklin State: TN Zip Code: 37064

Occupation: political adviser Employer: self

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

In-Kind Contribution Value: \$ 147.62 In-Kind Contribution Date: 1-30-2026 Aggregate This Election: \$ 216.21

Description of In-Kind Contribution: purchase from Publix of supplies for signing party

Business or Organization Name: _____ OR

First Name: LeiAnn Middle Name: _____ Last Name: Gleaves

Address: 100 Sontag Dr City: Franklin State: TN Zip Code: 37064

Occupation: political adviser Employer: self

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

In-Kind Contribution Value: \$ 68.59 In-Kind Contribution Date: 1-30-2026 Aggregate This Election: \$ 216.21

Description of In-Kind Contribution: purchase from Chick-Fil-A of food for signing party

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: \$ 466.21

(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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Friends of Cheryl Brown
2. Reporting Period: Start Date: 1-23-2026 End Date: 3-31-2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 0

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: Joslin and Son Signs OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 630 Murfreesboro Pk City: Nashville State: TN Zip Code: 37210
Purpose of Expenditure: campaign signs
Amount of Expenditure: \$ 757.28 Date of Expenditure: \$ 3-16-2026

Business or Organization Name: Asap Awards & Engraving LLC OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4935 Main St. Ste 7 #420 City: Spring Hill State: TN Zip Code: 37174
Purpose of Expenditure: custom name tag
Amount of Expenditure: \$ 50.00 Date of Expenditure: \$ 3-25-2026

Business or Organization Name: Republic Firm OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1517 Scenic Rd City: Lawrenceburg State: TN Zip Code: 38464
Purpose of Expenditure: payment on contract for campaign website, and yard sign and palm card design
Amount of Expenditure: \$ 187.50 Date of Expenditure: \$ 3-25-2026

Business or Organization Name: Republican Women of Williamson County OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: c/o Debbie Ballard, President, 656 Good Springs Rd City: Brentwood State: TN Zip Code: 37027
Purpose of Expenditure: tickets⁽²⁾ to Just Desserts (event for candidates)
Amount of Expenditure: \$ 130.00 Date of Expenditure: \$ 3-25-2026

Business or Organization Name: Anedot Inc. OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1340 Poydras St., Ste 1770 City: New Orleans State: LA Zip Code: 70112
Purpose of Expenditure: charges for donations by credit card payment
Amount of Expenditure: \$ 79.60 Date of Expenditure: \$ 3-27-2026

Total Expenditures: \$ 1,204.38

(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: Friends of Cheryl Brown
2. Reporting Period: Start Date: 1-23-2026 End Date: 3-31-2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 1,204.38

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: Joslin and Son Signs OR

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

Address: 630 Murfreesboro PK City: Nashville State: TN Zip Code: 37210

Purpose of Expenditure: campaign signs

Amount of Expenditure: \$ 98.78 Date of Expenditure: \$ 3-31-2026

Business or Organization Name: Harland Clarke OR

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

Address: 15455 LaCantera Parkway City: San Antonio State: TX Zip Code: 78256

Purpose of Expenditure: checks for bank account

Amount of Expenditure: \$ 57.69 Date of Expenditure: \$ 3-18-2026

Business or Organization Name: Vista Print OR

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

Address: 275 Wyman Street City: Waltham State: MA Zip Code: 02451

Purpose of Expenditure: pushcards for campaign

Amount of Expenditure: \$ 218.66 Date of Expenditure: \$ 2-9-2026

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: \$ _____

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: \$ 1,579.51

(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: Friends of Cheryl Brown
2. Reporting Period: Start Date: 1-23-2026 End Date: 3-31-2026
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100). None

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

1. Candidate or Committee Name: Friends of Cheryl Brown

2. Reporting Period: Start Date: 1-23-2026 End Date: 3-31-2026

3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: Republic Firm

First Name: _____ Middle Name: _____

Last Name: _____

Address: 1517 Scenic Rd

City: Lawrenceburg

State: TN Zip Code: 38464

Description of
Obligation:

Contract for campaign
website, and yard sign
and palm card design

Outstanding
Balance (Period
Beginning)

\$ 0

Debt
Incurred
This Period

\$ 472.50

Payments
This Period

3-25-26

\$ 187.50

Outstanding
Balance
(Period End)

\$ 285.00

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)

\$