05/21/2018 11 : 30

Image# 201805219113310037 PAGE 1/2

## 48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

NAME OF COMMITTEE IN FUL Rick W. Allen for								
ADDRESS (number and street)	P.O. Box 338							
CITY STATE Augusta GA			ZIP CODE 30903-0338					
2. NAME OF CANDIDATE Allen, Richard, W, ,			3. OFFICE SO	3. OFFICE SOUGHT (State and District)			4. FEC IDENTIFICATION NUMBER	
			House	House GA 12				C00504019
5. IS THIS AN AMENDMENT?	X NO, THIS IS A	NEW FILING	YES, IT AME	NDS THE	NOTICE FIL	LED ON	/	
Bohannon, Edgar, Robin, Mr.,			Name of Emp Self	Name of Employer Self			Date (month, day, year)	Amount
MAILING ADDRESS 3024 Pine Needle Rd			Transaction	Transaction ID : 6A2DB173246714D02			05/19/2018	1000.00
CITY	STATE	ZIP CODE	Occupation				-	
Augusta	GA	30909-3053	Audiologist	Audiologist				
B. FULL NAME  AFLAC Incorporated PAC			-	Name of Employer				Amount
MAILING ADDRESS 1932 Wynnton Rd								2500.00
CITY	STATE	ZIP CODE	Transaction Occupation	ID : 664	410EBB1	26484604		
				Cocapation				
Columbus C. FULL NAME	GA	31999-000					Data (manath	A
Weyerhaeuser Po	olitical Actio	n Committe	Name of Emp	loyer			Date (month, day, year)	Amount
MAILING ADDRESS PO Box 9777 CH3D21			Transaction	Transaction ID : 65EA765BB07BD453				2500.00
CITY	STATE	ZIP CODE	Occupation	Occupation			-	
Federal Way	WA	98063-9777	7					
D. FULL NAME  National Alliance Of Forest Owners Political Action Committee			Name of Emp	Name of Employer			Date (month, day, year)	Amount
MAILING ADDRESS 122 C St NW							05/19/2018	1000.00
Ste 630			Transaction	Transaction ID: 63011E2A1D1F742FF			:	
CITY	STATE	ZIP CODE	Occupation	Occupation			-	
Washington	DC	20001-214	8					
E. FULL NAME National Association of Insurance and Financial Advisors Political Action Committee			Name of Emp	Name of Employer			Date (month, day, year)	Amount
MAILING ADDRESS 2901 Telestar Ct			Transaction	Transaction ID : 645B4015B9CD246C			05/19/2018	3000.00
CITY	STATE	ZIP CODE	Occupation	٠٠. ١٠٠	,5 <del>,</del> 0100	3352400	-	
Falls Church	VA	22042-126	·	P				
SIGNATURE (optional)  Meybohm, E. G., , ,			[Electronically	Filed]	<b>DATE</b> 05/21/2	018	Federal Ele 999 E Street, NW	Information contact: lection Commission , Washington, DC 20463 9530, Local 202-694-1100

Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.



## 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

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NAME OF COMMITTEE IN FULL     Rick W. Allen for Congress			
ADDRESS (number and street) P.O. Box 338			
P.O. Box 336			
CITY, STATE, and ZIP CODE			
Augusta	GA 30903-0338	continuatio	on page
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION	ON NUMBER
Allen, Richard, W, ,	House GA 12	C00504019	
5. ISTHIS AN AMENDMENT? X NO, THIS IS A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON	/	/
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
Lockheed Martin Employees' Political Action Committee		day, year)	
		05/19/2018	1000.00
2121 Crystal Drive			
Suite 100	Transaction ID : 6CACBC5157FF24AA	897(	
Arlington VA 22202-3706	Occupation		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
National Association of Insurance and Financial Advisors		day, year)	
Political Action Committee		05/19/2018	2000.00
2901 Telestar Ct			
	Transaction ID : 6005F8A0306934254	<b>361</b>	
Falls Church VA 22042-1260	Occupation		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
Realtors Political Action Committee (R.P.A.C.)		day, year)	
		05/19/2018	1000.00
430 N Michigan Ave			
	Transaction ID: 6F6E3BE45CF2A4F0	EBA3	
Chicago IL 60611-4011	Occupation		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
		day, year)	
		_	
	Occupation		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
E. I SEE MAILE, MAILING ADDITEOU AND ZIF CODE	Name of Employer	day, year)	
	Occupation		