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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 FU Rick W. Allen for									
ADDRESS (number and street)	P.O. Box 338								
CITY STATE Augusta GA				ZIP CODE 30903-0338					
2. NAME OF CANDIDATE			3. OFFICE SOU	3. OFFICE SOUGHT (State and District)				4. FEC IDENTIFICATION NUMBER	
Allen, Richard, W, ,			House	House GA 12			C00504019		
5. IS THIS AN AMENDMENT?	NO, THIS IS A	NEW FILING	YES, IT AMENI	DS THE	NOTICE FIL	ED ON	//		
Kuhlke, Beth, W, Mr.,			Name of Emplo None	Name of Employer None			Date (month, day, year)	Amount	
MAILING ADDRESS 824 Milledge Rd			Transaction I	Transaction ID : 65999134CC6294D24				2300.00	
CITY	STATE	ZIP CODE	Occupation						
Augusta	GA	30904-4352	Homemaker	·					
B. FULL NAME	- Ort	30904-4332	Name of Emplo	wer			Date (month,	Amount	
Hargather, Jamie, D., Mr.,				Wilson, Hull & Neal					
MAILING ADDRESS							11/02/2016	1000.00	
1915 Claremont St			Transaction II	D : 6A	D16924B	565D4FE	4		
CITY	STATE	ZIP CODE	Occupation	Occupation			-		
Atlanta	GA	30318-3017	real estate	real estate					
C. FULL NAME			Name of Emplo	Name of Employer				Amount	
McWhorter, Aaro	n, , Mr.,		Self				day, year)		
MAILING ADDRESS 1490 Black Dirt Rd							11/02/2016	1000.00	
			Transaction I	ID : 63	D009316	C4DB4520			
CITY	STATE	ZIP CODE	Occupation	Occupation					
Whitesburg	GA	30185-2749	Farmer	Farmer					
D. FULL NAME National Association of Convenience Stores Political Action Committee (NACS PAC)			Name of Emplo	Name of Employer				Amount	
MAILING ADDRESS 1600 Duke St				-			11/02/2016	1500.00	
1000 Duke St			Transaction II	D : 620	C2411D	1DC34B49			
CITY	STATE	ZIP CODE	Occupation	ecupation			-		
Alexandria	VA	22314-3466							
E. FULL NAME National Automobile Dealers Association Political Action Committee (NADA PAC)			Name of Emplo	Name of Employer				Amount	
MAILING ADDRESS 412 1st St SE				Transaction ID : 6AEFA6AB1A8BB45			11/02/2016	5000.00	
CITY	STATE	ZIP CODE	Occupation	Occupation					
Washington	DC	20003-1804							
SIGNATURE (optional) Meybohm, E. G., , ,			[Electronically I	Filed]	DATE 11/02/20	016	Federal Ele 999 E Street, NW	nformation contact: ection 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.



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Name of Committee in Full Rick W. Allen for Congress			
ADDRESS (number and street) P.O. Box 338		-	
		_	
CITY, STATE, and ZIP CODE		continuatio	n nage
Augusta	GA 30903-0338		
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION 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
FERT PAC (The Political Action Committee Of The Fertilizer Institute)		day, year)	1000.00
425 3rd St SW			
Ste 950	Transaction ID : 67E6D4E23D6A6462		
Washington DC 20024-3230	Occupation		
		5	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
Franchising Political Action Committee		, ,	
AFOA IZ OANIM		11/02/2016	2500.00
1501 K St NW	Transaction ID : 6B3F6E1890F0247E0	28B4	
Ste 350	Occupation	3004	
Washington DC 20005-1412	Codepailon		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
Kavuri, Kishore, , ,	Veterans Health Administration	day, year)	
raran, raenere, , ,		11/02/2016	1000.00
	Transaction ID: 64756FF000FAD47B	EAAD	
	Occupation		
	Pharmacist	Data (manda	A
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
Redding, T.E., , ,	Metter Ford		
PO Box 327		11/02/2016	1000.00
PO BOX 321	Transaction ID : 662083E0170844B9D		
	Occupation		
Metter GA 30439-0327	Auto Dealer		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation	-	