



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Rick W. Allen for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	124782.65	256752.65
(b) Total Contribution Refunds (from Line 20(d)) .....		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	124782.65	256752.65
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	145610.85	186749.17
(b) Total Offsets to Operating Expenditures (from Line 14).....		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	145610.85	186749.17
8. Cash on Hand at Close of Reporting Period (from Line 27).....	92130.42	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	530000	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Rick W. Allen for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2013 To: M M / D D / Y Y Y Y 09 / 30 / 2013

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	106550	233625
(ii) Unitemized.....	6692	11587
(iii) TOTAL of contributions from individuals ▶	113242	245212
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....	11540.65	11540.65
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	124782.65	256752.65
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>		
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....		30000
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....		30000
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>		
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>		
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	<b>124782.65</b>	<b>286752.65</b>

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	145610.85	186749.17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans .....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS .....		
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	145610.85	186749.17

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	112958.62
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	124782.65
25. SUBTOTAL (add Line 23 and Line 24).....	237741.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	145610.85
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	92130.42

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gary Enterprises LLLP**

Mailing Address 3032 Bransford Rd

City Augusta State GA Zip Code 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**08 / 21 / 2013**

**Transaction ID : SA11Ai-CN1201**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. William T Gary**

Mailing Address 3032 Bransford Rd

City Augusta State GA Zip Code 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**08 / 21 / 2013**

**Transaction ID : SA11Ai-CN1202**

Amount of Each Receipt this Period  
**500**

Partnership-Gary Enterprises LLLP

**[MEMO ITEM]**  
 \$500.00 MEMO Partnership Attributed

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas C. Adams Jr**

Mailing Address 83 Wychewood Drive

City Memphis State TN Zip Code 38117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
First Tennessee Bank Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**08 / 26 / 2013**

**Transaction ID : SA11Ai-CN1210**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1500.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John C Allen III**

Mailing Address 4357 Deerwood Lane

City Evans	State GA	Zip Code 30809
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Allen & Batchelor	Occupation Contractor/Owner
---------------------------------------	--------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2013

**Transaction ID : SA11Ai-CN1345**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James L Allgood III**

Mailing Address PO Box 891

City Dublin	State GA	Zip Code 31040
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FEC ID number of contributing federal political committee. **C**

Name of Employer Allgood Services Inc.	Occupation Chairman
---	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11Ai-CN1379**

Amount of Each Receipt this Period  
250

**C.** Full Name (Last, First, Middle Initial)  
**Taz L. Anderson Jr**

Mailing Address 2931 Paces Ferry Road

City Atlanta	State GA	Zip Code 30339
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Taz Anderson Realty Co	Occupation Real Estate Advertising
--	---------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11Ai-CN1247**

Amount of Each Receipt this Period  
250

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cathy Armstrong</b>		Date of Receipt MM / DD / YYYY 07 / 09 / 2013
Mailing Address 3032 Lake Forest Dr		<b>Transaction ID : SA11Ai-CN1148</b>
City Augusta	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

Full Name (Last, First, Middle Initial) <b>B. Mr. John M. Arnold</b>		Date of Receipt MM / DD / YYYY 08 / 19 / 2013
Mailing Address 737 Lullwater Rd NE		<b>Transaction ID : SA11Ai-CN1191</b>
City Atlanta	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Self	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) <b>C. Mr. Jon D. Babb</b>		Date of Receipt MM / DD / YYYY 09 / 10 / 2013
Mailing Address 2682 Edward Ave		<b>Transaction ID : SA11Ai-CN1279</b>
City Baton Rouge	State LA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Information Management Solutions	Occupation CEO/Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4100.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. David A Ball**

Mailing Address 2001 Westside Rd

City Statesboro State GA Zip Code 30458

FEC ID number of contributing federal political committee. **C**

Name of Employer Ball Properties Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1362**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Clarence T Barinowski**

Mailing Address 2387 Louisville Rd

City Appling State GA Zip Code 30802-3601

FEC ID number of contributing federal political committee. **C**

Name of Employer Barinowski Investment Co Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 26 / 2013**

**Transaction ID : SA11Ai-CN1209**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Clarence T Barinowski**

Mailing Address 2387 Louisville Rd

City Appling State GA Zip Code 30802-3601

FEC ID number of contributing federal political committee. **C**

Name of Employer Barinowski Investment Co Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 26 / 2013**

**Transaction ID : SA11Ai-CN1340**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1500.00**



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bill Beazley**

Mailing Address 1437 Ashwood Dr

City State Zip Code  
Evans GA 30809-9604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Homebuilder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2013**

**Transaction ID : SA11Ai-CN1352**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Philip E. Beck**

Mailing Address 245 Peachtree Center Ave NE  
Suite 2700

City State Zip Code  
Atlanta GA 30303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Smith Currie & Hancock LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2013**

**Transaction ID : SA11Ai-CN1221**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Mary Donna Beman**

Mailing Address 719 Somerset Way

City State Zip Code  
Augusta GA 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
None Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 11 / 2013**

**Transaction ID : SA11Ai-CN1292**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1000.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lurner O. Benton III**

Mailing Address P.O. Drawer 350

City Monticello State GA Zip Code 31064

FEC ID number of contributing federal political committee. **C**

Name of Employer Putnam-Greene Financial Corp. Occupation Banking

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 27 / 2013**

**Transaction ID : SA11Ai-CN1212**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Brian Bishop**

Mailing Address 400 Jackson Street  
P.O. Box 606 ZIP 30475 FOR P.O.

City Vidalia State GA Zip Code 30474

FEC ID number of contributing federal political committee. **C**

Name of Employer Bishop-Durden Insurance Occupation Owner/Agent

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 23 / 2013**

**Transaction ID : SA11Ai-CN1336**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Edgar R Bohannon**

Mailing Address 3024 Pine Needle Rd

City Augusta State GA Zip Code 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Audiologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1374**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1750.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. William Scott Bohlke**

Mailing Address 2620 ClitoRoad

City Statesboro State GA Zip Code 30461

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2013

**Transaction ID : SA11Ai-CN1344**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. David L. Booker**

Mailing Address 2321 Kings Way

City Augusta State GA Zip Code 30904

FEC ID number of contributing federal political committee. **C**

Name of Employer Laboratory Medicine PC Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2013

**Transaction ID : SA11Ai-CN1166**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James R Borders**

Mailing Address 315 Valley Rd NW

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Novare Group Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2013

**Transaction ID : SA11Ai-CN1348**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1500.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Darrell T Boutwell**

Mailing Address 3533 Westlake Dr

City Augusta State GA Zip Code 30907

FEC ID number of contributing federal political committee. **C**

Name of Employer: boutwell chiropractic group pc Occupation: chiropractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 09 / 17 / 2013

**Transaction ID : SA11Ai-CN1308**

Amount of Each Receipt this Period: 500

**B.** Full Name (Last, First, Middle Initial)  
**Greg Bowles**

Mailing Address 2609 Central Ave

City Augusta State GA Zip Code 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer: Bowles ConstructionInc. Occupation: Insurance Repir Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250

Date of Receipt: 09 / 30 / 2013

**Transaction ID : SA11Ai-CN1363**

Amount of Each Receipt this Period: 250

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Shirley W. Bracewell**

Mailing Address 3741 Pebble Beach Dr

City Augusta State GA Zip Code 30907

FEC ID number of contributing federal political committee. **C**

Name of Employer: None Occupation: Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 08 / 09 / 2013

**Transaction ID : SA11Ai-CN1168**

Amount of Each Receipt this Period: 500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Alan D Brosious**

Mailing Address 1018 Barrett Drive

City Evans State GA Zip Code 30809

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 13 / 2013

**Transaction ID : SA11Ai-CN1301**

Amount of Each Receipt this Period  
 250

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Wayne Bryant Brown**

Mailing Address 209 Hudson Trace

City Augusta State GA Zip Code 30907

FEC ID number of contributing federal political committee. **C**

Name of Employer Wayne Works Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 13 / 2013

**Transaction ID : SA11Ai-CN1304**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. William H Broyles II**

Mailing Address 335 Millicent Way

City Shreveport State LA Zip Code 71106

FEC ID number of contributing federal political committee. **C**

Name of Employer The Broyles Group Occupation Investments

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 19 / 2013

**Transaction ID : SA11Ai-CN1194**

Amount of Each Receipt this Period  
 1000

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Eric J. Bruce**

Mailing Address 3033 Woodrow Way

City Atlanta State GA Zip Code 30319

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Performex LLC

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 03 / 2013**

**Transaction ID : SA11Ai-CN1246**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**J Lindsay Builder Jr.**

Mailing Address 1085 Park Avenue

City Winter Park State FL Zip Code 32789

FEC ID number of contributing federal political committee. **C**

Name of Employer Page Scramton Sprouse Tucker Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2013**

**Transaction ID : SA11Ai-CN1214**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Malcolm Burgess**

Mailing Address PO Box 4146

City Macon State GA Zip Code 31208

FEC ID number of contributing federal political committee. **C**

Name of Employer Burgess Pigment Co. Occupation Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 30 / 2013**

**Transaction ID : SA11Ai-CN1226**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2250.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**G Marshall Butler**

Mailing Address **PO Box 7468**

City **Macon** State **GA** Zip Code **31209**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Butler Automotive Group** Occupation **Auto Dealer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 30 / 2013**

**Transaction ID : SA11Ai-CN1164**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mark L Cain**

Mailing Address **7 Highgate W**

City **Augusta** State **GA** Zip Code **30909-3109**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Augusta Urology Associates** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : SA11Ai-CN1350**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gary R Campbell**

Mailing Address **325 Commerce Loop**  
**P.O. Box 1659**

City **Vidalia** State **GA** Zip Code **30475**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VNS Corp** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 26 / 2013**

**Transaction ID : SA11Ai-CN1208**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1750.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Zane Christopher**

Mailing Address 319 Osprey Point

City North Augusta State SC Zip Code 29841

FEC ID number of contributing federal political committee. **C**

Name of Employer TaxSlayer Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 15 / 2013**

**Transaction ID : SA11Ai-CN1183**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Zane Christopher**

Mailing Address 319 Osprey Point

City North Augusta State SC Zip Code 29841

FEC ID number of contributing federal political committee. **C**

Name of Employer TaxSlayer Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1369**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Douglas P Clepper**

Mailing Address 3546 Lake Dr W

City Martinez State GA Zip Code 30907-8930

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 18 / 2013**

**Transaction ID : SA11Ai-CN1313**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3000.00**



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Charles H Coleman Jr**

Mailing Address 812 Carriage Ct

City Augusta State GA Zip Code 30901

FEC ID number of contributing federal political committee. **C**

Name of Employer Augusta Urology Associates Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1368**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert C Collins**

Mailing Address 532 Myrick St

City Waynesboro State GA Zip Code 30830

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 27 / 2013**

**Transaction ID : SA11Ai-CN1231**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Nanette A Connell**

Mailing Address 706 Montrose Ct

City Augusta State GA Zip Code 30904

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 03 / 2013**

**Transaction ID : SA11Ai-CN1237**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1600.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**F. Geoffery Conner**

Mailing Address 1608 Meadows Lane

City: Vidalia State: GA Zip Code: 30474

FEC ID number of contributing federal political committee: **C**

Name of Employer: Self Occupation: Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 09 / 03 / 2013

**Transaction ID : SA11Ai-CN1258**

Amount of Each Receipt this Period: 1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Edwin M Crawford**

Mailing Address 4410 Howell Pl

City: Nashville State: TN Zip Code: 37205

FEC ID number of contributing federal political committee: **C**

Name of Employer: Crawford Holdings LLC Occupation: Businessman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 08 / 28 / 2013

**Transaction ID : SA11Ai-CN1215**

Amount of Each Receipt this Period: 1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. David Cyr**

Mailing Address 108 River Rock Ct

City: Perry State: GA Zip Code: 31069

FEC ID number of contributing federal political committee: **C**

Name of Employer: Parrish Construction Group Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250

Date of Receipt: 09 / 18 / 2013

**Transaction ID : SA11Ai-CN1311**

Amount of Each Receipt this Period: 250

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jay Davis**

Mailing Address One National Dr

City Atlanta State GA Zip Code 30336

FEC ID number of contributing federal political committee. **C**

Name of Employer National Distributing Company Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 23 / 2013**

**Transaction ID : SA11Ai-CN1337**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Thomas E Day**

Mailing Address 3502 Wheeler Rd

City Augusta State GA Zip Code 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Endodontist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 19 / 2013**

**Transaction ID : SA11Ai-CN1325**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Heather Deal**

Mailing Address 3493 Heatherstone Way

City Augusta State GA Zip Code 30907

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1373**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1750.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lloyd Defoor**

Mailing Address 6430 Ridge Rd

City State Zip Code  
Appling GA 30802-4024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
DeFoor Realty Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2013

**Transaction ID : SA11Ai-CN1185**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Jeffrey J Dent**

Mailing Address 56 Conifer Cir

City State Zip Code  
Augusta GA 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2013

**Transaction ID : SA11Ai-CN1314**

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Samuel Dipolito**

Mailing Address 106 Oak Ridge Drive

City State Zip Code  
Statesboro GA 30458

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Dipolito Realty Co-Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2013

**Transaction ID : SA11Ai-CN1333**

Amount of Each Receipt this Period  
300

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1800.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Julia C. Dudley**

Mailing Address 4400 Ivy Rd

City Charlottesville State VA Zip Code 22903

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11Ai-CN1251**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Dan Duggan Jr**

Mailing Address 2227 Pickens Rd

City Augusta State GA Zip Code 30904

FEC ID number of contributing federal political committee. **C**

Name of Employer University Surgical Association Occupation General Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11Ai-CN1385**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Jewell B. Duncan**

Mailing Address 3285 Wheeler Rd

City Augusta State GA Zip Code 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11Ai-CN1259**

Amount of Each Receipt this Period  
**1500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2250.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Michael T Dunham**

Mailing Address 245 Stonehaven Dr

City Fayetteville State GA Zip Code 30215

FEC ID number of contributing federal political committee. **C**

Name of Employer Associated General Contractors Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2013

**Transaction ID : SA11Ai-CN1310**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Kenneth W. Durden Jr**

Mailing Address 698 Heggies Ridge Drive

City Appling State GA Zip Code 30802

FEC ID number of contributing federal political committee. **C**

Name of Employer Sitemaster Inc. Occupation Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2013

**Transaction ID : SA11Ai-CN1315**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. S Herbert Elliott Jr**

Mailing Address PO Box 218

City Augusta State GA Zip Code 30903

FEC ID number of contributing federal political committee. **C**

Name of Employer Elliott Sons Inc. Occupation Mortician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2013

**Transaction ID : SA11Ai-CN1218**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1350.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Rick L Evans**

Mailing Address 3674 Cypress Point Dr

City Augusta State GA Zip Code 30907

FEC ID number of contributing federal political committee. **C**

Name of Employer Serotta Maddocks Evans & Co. CPAs Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 26 / 2013**

**Transaction ID : SA11Ai-CN1339**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Frank L. Flautt Jr**

Mailing Address 26 E. St. Lucia Lane

City Santa Rosa Beach State FL Zip Code 32459

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Hotel

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 26 / 2013**

**Transaction ID : SA11Ai-CN1204**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jay B Forrester**

Mailing Address 2222 Huntington Rd

City Augusta State GA Zip Code 30904

FEC ID number of contributing federal political committee. **C**

Name of Employer Georgia Bank & Trust Occupation Group VP/Senior Lending Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 30 / 2013**

**Transaction ID : SA11Ai-CN1223**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**750.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Sandra N Freedman**

Mailing Address 7 Retreat Rd

City Augusta State GA Zip Code 30909-1837

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11Ai-CN1248**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Sandra N Freedman**

Mailing Address 7 Retreat Rd

City Augusta State GA Zip Code 30909-1837

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11Ai-CN1360**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Howard C Gaines**

Mailing Address 6 Farnham Pl

City Metairie State LA Zip Code 70005

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11Ai-CN1252**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1500.00**



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Wilson B Garrett**

Mailing Address 249 Hidden Lakes Dr

City State Zip Code  
Carrollton GA 30116

FEC ID number of contributing federal political committee. **C**

Name of Employer RA-LIN Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11Ai-CN1378**

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James C. Gatewood**

Mailing Address P.O. Box 488

City State Zip Code  
Americus GA 31709

FEC ID number of contributing federal political committee. **C**

Name of Employer Gatewood Skipper & Rambo Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2013

**Transaction ID : SA11Ai-CN1331**

Amount of Each Receipt this Period  
250

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John W Gibson**

Mailing Address 3011 Bransford Rd

City State Zip Code  
Augusta GA 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer Hull Stoney Gibson Occupation Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11Ai-CN1242**

Amount of Each Receipt this Period  
250

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Charles B. Ginden**

Mailing Address 866 Carlton Ridge

City Atlanta State GA Zip Code 30342

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11Ai-CN1375**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. J Littleton Glover Jr**

Mailing Address PO Box 1038

City Newnan State GA Zip Code 30264

FEC ID number of contributing federal political committee. **C**

Name of Employer Glover & Davis PA Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11Ai-CN1257**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John T Glover**

Mailing Address 1868 Garroux Rd NW

City Atlanta State GA Zip Code 30327

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 12 / 2013

**Transaction ID : SA11Ai-CN1177**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3000.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Steven Goldberg**

Mailing Address 1016 Beverly Heights Dr

City Augusta State GA Zip Code 30907

FEC ID number of contributing federal political committee. **C**

Name of Employer Goldberg Dental Group Occupation Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1371**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Maria T Greenway**

Mailing Address 3518 Lakestone Ct

City Augusta State GA Zip Code 30907

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**08 / 19 / 2013**

**Transaction ID : SA11Ai-CN1192**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Ruth Lee Hair**

Mailing Address 1707 Briarcliff Cir

City Dalton State GA Zip Code 30720

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 06 / 2013**

**Transaction ID : SA11Ai-CN1268**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1700.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ronald V. Hall**

Mailing Address P.O. Box 308

City: Vidalia State: GA Zip Code: 30475

FEC ID number of contributing federal political committee: **C**

Name of Employer: Ronald V. Hall Funeral Home Occupation: Funeral Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1000**

Date of Receipt: 09 / 06 / 2013

**Transaction ID : SA11Ai-CN1266**

Amount of Each Receipt this Period: **1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jamie D. Hargather**

Mailing Address 1915 Claremont St

City: Atlanta State: GA Zip Code: 30318

FEC ID number of contributing federal political committee: **C**

Name of Employer: Wilson Hull & Neal Occupation: Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1000**

Date of Receipt: 09 / 18 / 2013

**Transaction ID : SA11Ai-CN1316**

Amount of Each Receipt this Period: **1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Harn**

Mailing Address 3564 Stevens Way

City: Augusta State: GA Zip Code: 30907

FEC ID number of contributing federal political committee: **C**

Name of Employer: Benefit Coordinators Inc Occupation: Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: 09 / 19 / 2013

**Transaction ID : SA11Ai-CN1326**

Amount of Each Receipt this Period: **500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2500.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Debra D. Hatcher**

Mailing Address 1067 Peninsula Crossing

City Evans State GA Zip Code 30609

FEC ID number of contributing federal political committee. **C**

Name of Employer Keller Williams Realty Occupation Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2013

**Transaction ID : SA11Ai-CN1354**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**JoAnn Hatcher**

Mailing Address 3111 Vassar Dr

City Augusta State GA Zip Code 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2013

**Transaction ID : SA11Ai-CN1353**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Randolph V Hayes**

Mailing Address PO Box 6058

City Anderson State SC Zip Code 29621

FEC ID number of contributing federal political committee. **C**

Name of Employer Ralph Hayes Toyota Occupation Auto Dealer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2013

**Transaction ID : SA11Ai-CN1167**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2500.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John T. Hazel Jr**

Mailing Address 6254 Huntley Road

City Broad Run State VA Zip Code 20137

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Businessman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2013

**Transaction ID : SA11Ai-CN1278**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Milena Henderson**

Mailing Address 475 Old Evans Road

City Evans State GA Zip Code 30809

FEC ID number of contributing federal political committee. **C**

Name of Employer Kelley Electrical Occupation Administrative Assistant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2013

**Transaction ID : SA11Ai-CN1269**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. William T Herrington**

Mailing Address 1110 Laurel Pl

City Athens State GA Zip Code 30606

FEC ID number of contributing federal political committee. **C**

Name of Employer Athens Radiology Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11Ai-CN1376**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2000.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Pratt Hill**

Mailing Address 212 Savannah Ave

City Statesboro State GA Zip Code 30458

FEC ID number of contributing federal political committee. **C**

Name of Employer Lee Hill & Johnston Occupation Insurance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 26 / 2013**

**Transaction ID : SA11Ai-CN1342**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Charles W Hock Jr**

Mailing Address PO Box 904

City Augusta State GA Zip Code 30903

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Real Estate Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 03 / 2013**

**Transaction ID : SA11Ai-CN1254**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Amy D Holleran**

Mailing Address 612 Emerald Crossing

City Evans State GA Zip Code 30809

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1386**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2000.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Vendie H Hooks III**

Mailing Address 2240 Cumming Rd

City Augusta State GA Zip Code 30904

FEC ID number of contributing federal political committee. **C**

Name of Employer: Colon & Rectal Surgery Associates Occupation: Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1000**

Date of Receipt: **09 / 16 / 2013**

**Transaction ID : SA11Ai-CN1306**

Amount of Each Receipt this Period: **1000**

**B.** Full Name (Last, First, Middle Initial)  
**W R Howell**

Mailing Address 42113 N 105th Street

City Scottsdale State AZ Zip Code 85262

FEC ID number of contributing federal political committee. **C**

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **250**

Date of Receipt: **09 / 10 / 2013**

**Transaction ID : SA11Ai-CN1276**

Amount of Each Receipt this Period: **250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Eugene M. Howerdd Jr**

Mailing Address 110 Carnoustie Dr

City Sapphire State NC Zip Code 28774

FEC ID number of contributing federal political committee. **C**

Name of Employer: Howerdd Financial Corp. Occupation: President/CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1000**

Date of Receipt: **08 / 12 / 2013**

**Transaction ID : SA11Ai-CN1175**

Amount of Each Receipt this Period: **1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2250.00**



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Dennis H Ingley**

Mailing Address 2171 Ga Hwy 13 E

City: Vidalia State: GA Zip Code: 30474

FEC ID number of contributing federal political committee: **C**

Name of Employer: Ingley Moore Paradice & Co LLC Occupation: CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **250**

Date of Receipt: **08 / 26 / 2013**

**Transaction ID : SA11Ai-CN1207**

Amount of Each Receipt this Period: **250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Benjamin A Jackson**

Mailing Address 2812 Hillcreek Dr

City: Augusta State: GA Zip Code: 30909

FEC ID number of contributing federal political committee: **C**

Name of Employer: Self Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: **07 / 29 / 2013**

**Transaction ID : SA11Ai-CN1161**

Amount of Each Receipt this Period: **500**

**C.** Full Name (Last, First, Middle Initial)  
**Marvin Katz**

Mailing Address 591 Firestone Pl

City: Martinez State: GA Zip Code: 30907

FEC ID number of contributing federal political committee: **C**

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **600**

Date of Receipt: **09 / 06 / 2013**

**Transaction ID : SA11Ai-CN1262**

Amount of Each Receipt this Period: **100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**850.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Frank B Kelly**

Mailing Address 270 Country Club Rd

City Macon State GA Zip Code 31210

FEC ID number of contributing federal political committee. **C**

Name of Employer Forsyth Orthopedic Occupation Orthopedic Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 19 / 2013**

**Transaction ID : SA11Ai-CN1193**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Brian Kent**

Mailing Address PO Box 2115

City Statesboro State GA Zip Code 30459

FEC ID number of contributing federal political committee. **C**

Name of Employer BAK Builders Occupation Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1364**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Beth W Kuhlke**

Mailing Address 824 Milledge Rd

City Augusta State GA Zip Code 30904-4352

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1370**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2250.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Willard Lasseter**

Mailing Address 44 Cherokee Road

City Moultrie State GA Zip Code 31768

FEC ID number of contributing federal political committee. **C**

Name of Employer Lasseter Tractor Company Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 19 / 2013

**Transaction ID : SA11Ai-CN1323**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Francois Leger**

Mailing Address 478 Front St

City North Augusta State SC Zip Code 29841

FEC ID number of contributing federal political committee. **C**

Name of Employer FPL Food LLC Occupation CEO President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2013

**Transaction ID : SA11Ai-CN1303**

Amount of Each Receipt this Period  
 500

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Donna L. Lovelace**

Mailing Address 155 Cofield Rd

City Augusta State GA Zip Code 30907

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2013

**Transaction ID : SA11Ai-CN1159**

Amount of Each Receipt this Period  
 500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>Mr. Joseph T Lykes III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 27 / 2013
Mailing Address 2910 Hawthorne Rd W		<b>Transaction ID : SA11Ai-CN1211</b>
City Tampa	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Self	Occupation Investments	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) <b>Mr. Fielder Martin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 18 / 2013
Mailing Address 225 Royal Lytham Ct		<b>Transaction ID : SA11Ai-CN1319</b>
City Duluth	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Baker Donelson Bearman Caldwell & Ber	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 325	

Full Name (Last, First, Middle Initial) <b>Mr. John H Martin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 28 / 2013
Mailing Address 2532 Falling Branch Ln		<b>Transaction ID : SA11Ai-CN1219</b>
City Evans	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer R W Allen LLC	Occupation Construction	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3350.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Thomas R McArthur**

Mailing Address 300 Commerce Way

City State Zip Code  
Vidalia GA 30474

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Altamaha Animal Clinic Veterinarian

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 11 / 2013

**Transaction ID : SA11Ai-CN1289**

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James A. McLendon**

Mailing Address 750 Petross Road

City State Zip Code  
Vidalia GA 30474

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 11 / 2013

**Transaction ID : SA11Ai-CN1288**

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. E. G. Meybohm**

Mailing Address 3519 Wheeler Rd

City State Zip Code  
Augusta GA 30909-6516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Meybohm Realtors Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2013

**Transaction ID : SA11Ai-CN1366**

Amount of Each Receipt this Period  
500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. E G Michaels III**

Mailing Address 1755 Nancy Creek Bluff NW

City Atlanta State GA Zip Code 30327

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 15 / 2013

**Transaction ID : SA11Ai-CN1181**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Richard D Moore**

Mailing Address 20 Westcross Dr

City Savannah State GA Zip Code 31411

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 21 / 2013

**Transaction ID : SA11Ai-CN1200**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Lawrence D Moss**

Mailing Address 778 Camellia Rd

City Augusta State GA Zip Code 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer Augusta Mortgage Co. Occupation Mortgage Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11Ai-CN1358**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1500.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Louis Mulherin III**

Mailing Address 3220 Lake Forest Dr

City Augusta State GA Zip Code 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer Mucherin Lumber Occupation Merchant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1357**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Carl E. Mundy Jr**

Mailing Address 9308 Ludgate Drive

City Alexandria State VA Zip Code 22309

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 28 / 2013**

**Transaction ID : SA11Ai-CN1222**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Matt Murphy**

Mailing Address 3703 Wexford PI N

City Martinez State GA Zip Code 30907

FEC ID number of contributing federal political committee. **C**

Name of Employer The Murphy Agency Inc. Occupation Insurance Agent

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1380**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**750.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Logan Nalley Jr**

Mailing Address 2229 Pickens Rd

City Augusta State GA Zip Code 30904

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Prosthodontist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2013

**Transaction ID : SA11Ai-CN1351**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Richard W Naylor**

Mailing Address 1209 Village Run NE

City Atlanta State GA Zip Code 30319

FEC ID number of contributing federal political committee. **C**

Name of Employer Graham- Naylor Agency Occupation Insurance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11Ai-CN1256**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. J Stephen Olsen**

Mailing Address 1750 The Exchange 200 SE

City Atlanta State GA Zip Code 30339

FEC ID number of contributing federal political committee. **C**

Name of Employer Power Brands Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2013

**Transaction ID : SA11Ai-CN1180**

Amount of Each Receipt this Period  
**2500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**4000.00**



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Anne Parker**

Mailing Address 1766 Garraux Place

City Atlanta State GA Zip Code 30327

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Interior Designer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2013

**Transaction ID : SA11Ai-CN1296**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John H. Parker Jr**

Mailing Address 1766 Garraux Place

City Atlanta State GA Zip Code 30327

FEC ID number of contributing federal political committee. **C**

Name of Employer Parker Hudson Rainer & Dobbs Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2013

**Transaction ID : SA11Ai-CN1293**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John H. Parker Jr**

Mailing Address 1766 Garraux Place

City Atlanta State GA Zip Code 30327

FEC ID number of contributing federal political committee. **C**

Name of Employer Parker Hudson Rainer & Dobbs Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2013

**Transaction ID : SA11Ai-CN1295**

Amount of Each Receipt this Period  
**2600**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**7800.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mid Parker**

Mailing Address **PO Box 121**

City **Claxton** State **GA** Zip Code **30417**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Claxton Bakery Inc.** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 21 / 2013**

**Transaction ID : SA11Ai-CN1197**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Ronald T Peacock**

Mailing Address **506 Regent PI**

City **Augusta** State **GA** Zip Code **30909**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Drs. Peacock & Rafoty PC** Occupation **Oral Surgeon**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1398**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Patrick A. Pellicano**

Mailing Address **PO Box 4009**

City **Albany** State **GA** Zip Code **31706**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Pellicano Construction** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 10 / 2013**

**Transaction ID : SA11Ai-CN1282**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2000.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 126  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Levi A Pollard V**

Mailing Address 3310 Scotts Ferry Rd

City State Zip Code  
Appling GA 30802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Pollard Lumber Co Inc. Manager/Engineer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 11 / 2013

**Transaction ID : SA11Ai-CN1291**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Larry S. Prather Sr**

Mailing Address PO Box 70

City State Zip Code  
Harlem GA 30814-0070

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Prather Construction Co. Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 10 / 2013

**Transaction ID : SA11Ai-CN1280**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Henry J Proctor**

Mailing Address 7059 Westside Rd

City State Zip Code  
Statesboro GA 30458

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Dentist

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11Ai-CN1381**

Amount of Each Receipt this Period  
500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Phillip L Proctor**

Mailing Address 3532 Granite Way

City Augusta State GA Zip Code 30907

FEC ID number of contributing federal political committee. **C**

Name of Employer Criterium Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1387**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. George C Pursley**

Mailing Address 2561 Henry St

City Augusta State GA Zip Code 30904

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 29 / 2013**

**Transaction ID : SA11Ai-CN1160**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Norman B. Pursley Jr**

Mailing Address 686 Heggies Ridge Drive

City Appling State GA Zip Code 30802

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Midsouth Int & Ext

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1361**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2000.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 126  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Darrien Ramsey**

Mailing Address 148 Williams Ave

City Lyons State GA Zip Code 30436

FEC ID number of contributing federal political committee. **C**

Name of Employer Georgia Pine Stra Inc. Occupation General Manager

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2013

**Transaction ID : SA11Ai-CN1287**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Thomas E Reeve III**

Mailing Address 344 Club Dr W

City Carrollton State GA Zip Code 30117

FEC ID number of contributing federal political committee. **C**

Name of Employer Tanner Health System Occupation Physician

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11Ai-CN1243**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Patrick G. Renn**

Mailing Address 5205 Pacos Ferry Pl

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Renn Wealth Management Group Occupation CFP

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2013

**Transaction ID : SA11Ai-CN1195**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**850.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Carl T. Rhodes**

Mailing Address 6 Eagleton Court

City Augusta State GA Zip Code 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer TaxSlayer Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 15 / 2013**

**Transaction ID : SA11Ai-CN1182**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Jimmy Rhodes**

Mailing Address 500 Sumter Court

City Evans State GA Zip Code 30809

FEC ID number of contributing federal political committee. **C**

Name of Employer TaxSlayer Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 15 / 2013**

**Transaction ID : SA11Ai-CN1184**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. John W. Richards Jr**

Mailing Address 1030 Stevens Creek Rd

City Augusta State GA Zip Code 30907

FEC ID number of contributing federal political committee. **C**

Name of Employer Global Emergency Resources Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 16 / 2013**

**Transaction ID : SA11Ai-CN1305**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1250.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas T. Richards**

Mailing Address 80 WagonYard Plaza

City: Carrollton State: GA Zip Code: 30117

FEC ID number of contributing federal political committee: **C**

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1000**

Date of Receipt: 08 / 26 / 2013

**Transaction ID : SA11Ai-CN1205**

Amount of Each Receipt this Period: **1000**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Scott Riley**

Mailing Address 3517 Greenway Dr

City: Evans State: GA Zip Code: 30809

FEC ID number of contributing federal political committee: **C**

Name of Employer: Self Occupation: Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **250**

Date of Receipt: 07 / 09 / 2013

**Transaction ID : SA11Ai-CN1147**

Amount of Each Receipt this Period: **250**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Deen Day Sanders**

Mailing Address 4725 Peachtree Corners Cir

City: Norcross State: GA Zip Code: 30092

FEC ID number of contributing federal political committee: **C**

Name of Employer: Cecil B Day Investment Company Occupation: Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1000**

Date of Receipt: 09 / 18 / 2013

**Transaction ID : SA11Ai-CN1317**

Amount of Each Receipt this Period: **1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2250.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robinson W Schilling**

Mailing Address 3402 Sasanqua Dr

City Augusta State GA Zip Code 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11Ai-CN1241**

Amount of Each Receipt this Period  
 150

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Gregory H Schulenburg**

Mailing Address 106 Cumberland Dr

City Carrollton State GA Zip Code 30117

FEC ID number of contributing federal political committee. **C**

Name of Employer Greenway Medical Occupation COO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2013

**Transaction ID : SA11Ai-CN1322**

Amount of Each Receipt this Period  
 250

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Abram J Serotta**

Mailing Address 701 Greene St

City Augusta State GA Zip Code 30901

FEC ID number of contributing federal political committee. **C**

Name of Employer SME CPA Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2013

**Transaction ID : SA11Ai-CN1341**

Amount of Each Receipt this Period  
 1000

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1400.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Stephen B. Shepherd**

Mailing Address 1800 Briarcliff Road

City Atlanta State GA Zip Code 30329

FEC ID number of contributing federal political committee. **C**

Name of Employer Plant Improvement Co. Inc. Occupation Corporate Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11Ai-CN1260**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Ronald E. Simmons**

Mailing Address 805 Lady of the Lake Boulevard

City Lewisville State TX Zip Code 75056

FEC ID number of contributing federal political committee. **C**

Name of Employer Retirement Advisor Of America Occupation Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11Ai-CN1245**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Angela J. Smith**

Mailing Address 1267 Furys Ferry Road

City Evans State GA Zip Code 30809

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2013

**Transaction ID : SA11Ai-CN1267**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1250.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Becky H Smith**

Mailing Address 814 Milledge Rd

City Augusta State GA Zip Code 30904

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 05 / 2013

**Transaction ID : SA11Ai-CN1144**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Eric D Smith**

Mailing Address 728 Milledge Rd

City Augusta State GA Zip Code 30904

FEC ID number of contributing federal political committee. **C**

Name of Employer Gulbrandsen Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11Ai-CN1367**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. R Lee Smith Jr**

Mailing Address 9 Somerset Ct

City Augusta State GA Zip Code 30909-1839

FEC ID number of contributing federal political committee. **C**

Name of Employer The Community Foundation Occupation President and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 30 / 2013

**Transaction ID : SA11Ai-CN1225**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1250.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. R Lee Smith Jr**

Mailing Address 9 Somerset Ct

City Augusta State GA Zip Code 30909-1839

FEC ID number of contributing federal political committee. **C**

Name of Employer The Community Foundation Occupation President and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 27 / 2013**

**Transaction ID : SA11Ai-CN1349**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Richard J Sosebee**

Mailing Address 445 Heards Ferry Rd

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C**

Name of Employer HPI Direct Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 12 / 2013**

**Transaction ID : SA11Ai-CN1176**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John V. Spence**

Mailing Address PO Box 1328

City Vidalia State GA Zip Code 30475

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1365**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1000.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RT Stanley**

Mailing Address 282 Stanley Lodge Lane

City Lyons State GA Zip Code 30436

FEC ID number of contributing federal political committee. **C**

Name of Employer Stanley Farms Occupation Onion Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 11 / 2013

**Transaction ID : SA11Ai-CN1286**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Matthew Sterner**

Mailing Address 3021 Timberwood Dr

City Appling State GA Zip Code 30802

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Construction

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2013

**Transaction ID : SA11Ai-CN1343**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. M Bert Storey**

Mailing Address 502 Scotts Way

City Augusta State GA Zip Code 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer Bert Storey Associates Occupation Commerical Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 27 / 2013

**Transaction ID : SA11Ai-CN1355**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1750.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Shirley J. Strickland**

Mailing Address 1915 Lakewood Drive

City: Vidalia State: GA Zip Code: 30474

FEC ID number of contributing federal political committee: **C**

Name of Employer: Self Occupation: Evans Concrete

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **250**

Date of Receipt: **09 / 11 / 2013**

**Transaction ID : SA11Ai-CN1285**

Amount of Each Receipt this Period: **250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph P Stubbs**

Mailing Address 102 Pine Needle Ct

City: Statesboro State: GA Zip Code: 30459

FEC ID number of contributing federal political committee: **C**

Name of Employer: Stubbs Oil Occupation: Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: **09 / 03 / 2013**

**Transaction ID : SA11Ai-CN1249**

Amount of Each Receipt this Period: **500**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Barbara R Tanner**

Mailing Address 119 Dixie St

City: Carrollton State: GA Zip Code: 30117

FEC ID number of contributing federal political committee: **C**

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **250**

Date of Receipt: **09 / 10 / 2013**

**Transaction ID : SA11Ai-CN1275**

Amount of Each Receipt this Period: **250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1000.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Michael J Taylor Jr**

Mailing Address PO Box 15421

City Augusta State GA Zip Code 30919

FEC ID number of contributing federal political committee. **C**

Name of Employer Dawson Taylor & Co Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 27 / 2013**

**Transaction ID : SA11Ai-CN1230**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Oren Trefz**

Mailing Address 430 Stevens Creek Rd

City Augusta State GA Zip Code 30907

FEC ID number of contributing federal political committee. **C**

Name of Employer Trefz & Trefz Inc. Occupation Food

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 13 / 2013**

**Transaction ID : SA11Ai-CN1302**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Kevin R Turpin**

Mailing Address 2350 Ellis Rd

City Kennesaw State GA Zip Code 30152

FEC ID number of contributing federal political committee. **C**

Name of Employer Conlan Company Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2013**

**Transaction ID : SA11Ai-CN1232**

Amount of Each Receipt this Period  
**2000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3000.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Samuel E Tyson Jr**

Mailing Address 2403 William St

City Augusta State GA Zip Code 30904

FEC ID number of contributing federal political committee. **C**

Name of Employer Tyson Walker Group Occupation Managing Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2013**

**Transaction ID : SA11Ai-CN1377**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Lana M. Valenta**

Mailing Address 6139 Woodland Drive

City Dallas State TX Zip Code 75225

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 30 / 2013**

**Transaction ID : SA11Ai-CN1228**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Wes Wheeler**

Mailing Address 407 Rawley Road  
Red Fox Ridge

City Americus State GA Zip Code 31719

FEC ID number of contributing federal political committee. **C**

Name of Employer Parker's Heating & AC Occupation Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 03 / 2013**

**Transaction ID : SA11Ai-CN1253**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3350.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 126  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Willis H. Willey**

Mailing Address 3031 Goodwyn Green Cir

City State Zip Code  
Memphis TN 38111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Investor

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2013

**Transaction ID : SA11Ai-CN1169**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**J. Douglas Williams**

Mailing Address 510 Avala Court

City State Zip Code  
Alpharetta GA 30022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
IHealth Technologies CEO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11Ai-CN1250**

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Warren W Wills Jr**

Mailing Address 2972 Habersham Way

City State Zip Code  
Atlanta GA 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MorrisManning and Martin Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11Ai-CN1244**

Amount of Each Receipt this Period  
250

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Fremont P Wirth**

Mailing Address 11 Shellworth Crossing

City Savannah State GA Zip Code 31411

FEC ID number of contributing federal political committee. **C**

Name of Employer Neurologic Institute Of Savannah Occupation Neuro Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1150**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 03 / 2013**

**Transaction ID : SA11Ai-CN1255**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Elizabeth C Wislar**

Mailing Address 1576 Tappahannock Trl

City Marietta State GA Zip Code 30062

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 06 / 2013**

**Transaction ID : SA11Ai-CN1264**

Amount of Each Receipt this Period  
**150**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Earl G Wright**

Mailing Address 483 Highland Ave

City Augusta State GA Zip Code 30909

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Pharmacist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 16 / 2013**

**Transaction ID : SA11Ai-CN1154**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1650.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robert A Yarbrough Jr**

Mailing Address 2187 Brooview Dr NW

City Atlanta State GA Zip Code 30318

FEC ID number of contributing federal political committee. **C**

Name of Employer Surety South LLC Occupation Insurance Broker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 11 / 2013**

**Transaction ID : SA11Ai-CN1328**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Wirt A Yerger Jr**

Mailing Address 129 Woodland Cir

City Jackson State MS Zip Code 39216

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Insurance Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 21 / 2013**

**Transaction ID : SA11Ai-CN1196**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**750.00**

**106550.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 126
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A. Associated General Contractors Of America PAC**

Full Name (Last, First, Middle Initial)  
Associated General Contractors Of America PAC

Mailing Address 2300 Wilson Blvd  
Ste 400

City State Zip Code  
Arlington VA 22201

FEC ID number of contributing federal political committee. **C** C00082917

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2013

**Transaction ID : SA11C-CN1318**

Amount of Each Receipt this Period  
5000

**B. Chambliss For Senate**

Full Name (Last, First, Middle Initial)  
Chambliss For Senate

Mailing Address P.O. Box 12469

City State Zip Code  
Atlanta GA 30355

FEC ID number of contributing federal political committee. **C** C00266932

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
390.65

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 03 / 2013

**Transaction ID : SA11C-CN1383**

Amount of Each Receipt this Period  
390.65

Food and Beverage for Fundraising Receipt

In-Kind Received Food and Beverage for Fundraising Reception

**C. Committee to Elect Butch Parrish**

Full Name (Last, First, Middle Initial)  
Committee to Elect Butch Parrish

Mailing Address 224 W. Main Street

City State Zip Code  
Swainsboro GA 30401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2013

**Transaction ID : SA11C-CN1312**

Amount of Each Receipt this Period  
250

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5640.65

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 126
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Friends Of Tommie Williams**

Mailing Address 148 Williams Ave

City Lyons State GA Zip Code 30436

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **900**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 11 / 2013**

**Transaction ID : SA11C-CN1290**

Amount of Each Receipt this Period  
**900**

**B.** Full Name (Last, First, Middle Initial)  
**Republican Majority Fund**

Mailing Address PO Box 144

City Alexandria State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C C00296640**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 19 / 2013**

**Transaction ID : SA11C-CN1324**

Amount of Each Receipt this Period  
**5000**

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5900.00**

**11540.65**

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 126			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Trail Blazer Campaign Services Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013
Mailing Address 620 Mendelssohn Avenue N Suite 186			Amount of Each Disbursement this Period 623.00 <b>Transaction ID : SB17-EX1744</b>
City Golden Valley	State MN	Zip Code 55427	
Purpose of Disbursement Reporting Software		Category/Type 001	Reporting Software
Candidate Name			
Office Sought:	House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Trail Blazer Campaign Services Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2013
Mailing Address 620 Mendelssohn Avenue N Suite 186			Amount of Each Disbursement this Period 623.00 <b>Transaction ID : SB17-EX1832</b>
City Golden Valley	State MN	Zip Code 55427	
Purpose of Disbursement Reporting Software		Category/Type 001	Reporting Software
Candidate Name			
Office Sought:	House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Trail Blazer Campaign Services Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2013
Mailing Address 620 Mendelssohn Avenue N Suite 186			Amount of Each Disbursement this Period 623.00 <b>Transaction ID : SB17-EX1883</b>
City Golden Valley	State MN	Zip Code 55427	
Purpose of Disbursement Reporting Software		Category/Type 001	Reporting Software
Candidate Name			
Office Sought:	House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1869.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2013
Mailing Address 525 8th St		Amount of Each Disbursement this Period 39.00
City Augusta	State GA	
Zip Code 30901	Purpose of Disbursement P.O. Box Rental	<b>Transaction ID : SB17-EX1859</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	P.O. Box Rental
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lauren Swing</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2013
Mailing Address 807 Saint Andrews Drive		Amount of Each Disbursement this Period 658.76
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Reimbursement for Computer Software	<b>Transaction ID : SB17-EX1781</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Reimbursement for Computer Software
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lauren Swing</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2013
Mailing Address 807 Saint Andrews Drive		Amount of Each Disbursement this Period 1787.35
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Net Salary	<b>Transaction ID : SB17-EX1769</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Net Salary
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2485.11
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lauren Swing</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2013
Mailing Address 807 Saint Andrews Drive		Amount of Each Disbursement this Period 176.60
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Mileage Reimbursement	<b>Transaction ID : SB17-EX1805</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Mileage Reimbursement
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lauren Swing</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2013
Mailing Address 807 Saint Andrews Drive		Amount of Each Disbursement this Period 1787.35
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Net Salary	<b>Transaction ID : SB17-EX1822</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lauren Swing</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2013
Mailing Address 807 Saint Andrews Drive		Amount of Each Disbursement this Period 1787.35
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Net Salary	<b>Transaction ID : SB17-EX1842</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Net Salary
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3751.30
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lauren Swing</b>			Date of Disbursement MM / DD / YYYY 08 / 29 / 2013	
Mailing Address 807 Saint Andrews Drive			Amount of Each Disbursement this Period 1787.35	
City Augusta	State GA	Zip Code 30909	Transaction ID : SB17-EX1878	
Purpose of Disbursement Net Salary		Category/ Type 001	Net Salary	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Lauren Swing</b>			Date of Disbursement MM / DD / YYYY 09 / 12 / 2013	
Mailing Address 807 Saint Andrews Drive			Amount of Each Disbursement this Period 1787.35	
City Augusta	State GA	Zip Code 30909	Transaction ID : SB17-EX1893	
Purpose of Disbursement Net Salary		Category/ Type 001	Net Salary	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Lauren Swing</b>			Date of Disbursement MM / DD / YYYY 09 / 27 / 2013	
Mailing Address 807 Saint Andrews Drive			Amount of Each Disbursement this Period 1787.35	
City Augusta	State GA	Zip Code 30909	Transaction ID : SB17-EX1940	
Purpose of Disbursement Net Salary		Category/ Type 001	Net Salary	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5362.05
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Diane Morgan</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2013
Mailing Address 756 Riverbluff Road			Amount of Each Disbursement this Period 565.52 <b>Transaction ID : SB17-EX1767</b>
City North Augusta	State SC	Zip Code 29841	
Purpose of Disbursement Net Salary	Candidate Name		Net Salary
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:	Category/Type 001		

Full Name (Last, First, Middle Initial) <b>B. Diane Morgan</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2013
Mailing Address 756 Riverbluff Road			Amount of Each Disbursement this Period 46.00 <b>Transaction ID : SB17-EX1809</b>
City North Augusta	State SC	Zip Code 29841	
Purpose of Disbursement Reimbursement for Office Supplies	Candidate Name		Reimbursement for Office Supplies
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:	Category/Type 001		

Full Name (Last, First, Middle Initial) <b>c. Diane Morgan</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2013
Mailing Address 756 Riverbluff Road			Amount of Each Disbursement this Period 565.53 <b>Transaction ID : SB17-EX1819</b>
City North Augusta	State SC	Zip Code 29841	
Purpose of Disbursement Net Salary	Candidate Name		Net Salary
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:	Category/Type 001		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1177.05
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Diane Morgan</b>			Date of Disbursement MM / DD / YYYY 08 / 15 / 2013		
Mailing Address 756 Riverbluff Road			Amount of Each Disbursement this Period 565.52		
City North Augusta	State SC	Zip Code 29841	Transaction ID : SB17-EX1841		
Purpose of Disbursement Net Salary		Category/ Type 001	Net Salary		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Diane Morgan</b>			Date of Disbursement MM / DD / YYYY 08 / 29 / 2013		
Mailing Address 756 Riverbluff Road			Amount of Each Disbursement this Period 565.53		
City North Augusta	State SC	Zip Code 29841	Transaction ID : SB17-EX1877		
Purpose of Disbursement Net Salary		Category/ Type 001	Net Salary		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Diane Morgan</b>			Date of Disbursement MM / DD / YYYY 09 / 12 / 2013		
Mailing Address 756 Riverbluff Road			Amount of Each Disbursement this Period 565.52		
City North Augusta	State SC	Zip Code 29841	Transaction ID : SB17-EX1892		
Purpose of Disbursement Net Salary		Category/ Type 001	Net Salary		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1696.57
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Diane Morgan</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2013
Mailing Address 756 Riverbluff Road		Amount of Each Disbursement this Period 565.53
City North Augusta	State SC	
Zip Code 29841	Purpose of Disbursement Net Salary	<b>Transaction ID : SB17-EX1939</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Strategy Group</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013
Mailing Address 2700 Cumberland Pkwy Ste 150		Amount of Each Disbursement this Period 5000.00
City Atlanta	State GA	
Zip Code 30339	Purpose of Disbursement Fundraising Consulting	<b>Transaction ID : SB17-EX1746</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising Consulting
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Strategy Group</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2013
Mailing Address 2700 Cumberland Pkwy Ste 150		Amount of Each Disbursement this Period 5000.00
City Atlanta	State GA	
Zip Code 30339	Purpose of Disbursement Fundraising Consulting	<b>Transaction ID : SB17-EX1774</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising Consulting
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10565.53
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capitol Strategy Group</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 13 / 2013</b>
Mailing Address <b>2700 Cumberland Pkwy Ste 150</b>		Amount of Each Disbursement this Period <b>5000.00</b>
City <b>Atlanta</b> State <b>GA</b> Zip Code <b>30339</b>	Purpose of Disbursement <b>Fundraising Consulting</b>	<b>Transaction ID : SB17-EX1848</b>
Candidate Name	Category/Type <b>001</b>	<b>Fundraising Consulting</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Strategy Group</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 17 / 2013</b>
Mailing Address <b>2700 Cumberland Pkwy Ste 150</b>		Amount of Each Disbursement this Period <b>5000.00</b>
City <b>Atlanta</b> State <b>GA</b> Zip Code <b>30339</b>	Purpose of Disbursement <b>Fundraising Consulting</b>	<b>Transaction ID : SB17-EX1905</b>
Candidate Name	Category/Type <b>001</b>	<b>Fundraising Consulting</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 09 / 2013</b>
Mailing Address <b>PO Box 660108</b>		Amount of Each Disbursement this Period <b>135.53</b>
City <b>Dallas</b> State <b>TX</b> Zip Code <b>75266</b>	Purpose of Disbursement <b>Telephone Expense</b>	<b>Transaction ID : SB17-EX1787</b>
Candidate Name	Category/Type <b>001</b>	<b>Telephone Expense</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>10135.53</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc.</b>			Date of Disbursement MM / DD / YYYY 07 / 08 / 2013	
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 1.44	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX1761	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc.</b>			Date of Disbursement MM / DD / YYYY 07 / 09 / 2013	
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 80.50	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX1764	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>			Date of Disbursement MM / DD / YYYY 07 / 10 / 2013	
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 349.90	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX1765	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	431.84
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.02
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	<b>Transaction ID : SB17-EX1766</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 28.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	<b>Transaction ID : SB17-EX1779</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 158.13
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	<b>Transaction ID : SB17-EX1780</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	188.90
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 126			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 1.44
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX1838	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 57.50
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX1839	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX1852	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	64.69
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 86.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	<b>Transaction ID : SB17-EX1860</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 57.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	<b>Transaction ID : SB17-EX1861</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 57.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	<b>Transaction ID : SB17-EX1881</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	201.25
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2013		
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 0.58		
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX1882		
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2013		
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 92.00		
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX1889		
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2013		
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 5.75		
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX1890		
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	98.33
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 86.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	<b>Transaction ID : SB17-EX1895</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 149.51
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	<b>Transaction ID : SB17-EX1896</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	<b>Transaction ID : SB17-EX1897</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	241.51
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2013	
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 28.75	
City San Francisco	State CA	Zip Code 94105	Transaction ID : <b>SB17-EX1898</b>	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2013	
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 29.00	
City San Francisco	State CA	Zip Code 94105	Transaction ID : <b>SB17-EX1910</b>	
Purpose of Disbursement Refund Fee		Category/ Type 001	Refund Fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2013	
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 33.07	
City San Francisco	State CA	Zip Code 94105	Transaction ID : <b>SB17-EX1908</b>	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	90.82
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2013	
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 28.75	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX1909	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2013	
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 14.38	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX1936	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2013	
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 71.88	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX1937	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	115.01
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2013
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 317.13 <b>Transaction ID : SB17-EX1938</b>
City San Francisco	State CA	Zip Code 94105	
Purpose of Disbursement Credit Card Service Fee		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Credit Card Service Fee	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2013
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 14.38 <b>Transaction ID : SB17-EX1948</b>
City San Francisco	State CA	Zip Code 94105	
Purpose of Disbursement Credit Card Service Fee		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Credit Card Service Fee	
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Internal Revenue Service</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2013
Mailing Address IRS Payment Center			Amount of Each Disbursement this Period 3064.00 <b>Transaction ID : SB17-EX1813</b>
City Ogden	State UT	Zip Code 84201	
Purpose of Disbursement Tax Payment		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Tax Payment	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3107.13
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>			Date of Disbursement M M / D D / Y Y Y Y <b>08 / 14 / 2013</b>	
Mailing Address IRS Payment Center			Amount of Each Disbursement this Period <b>3064.00</b>	
City Ogden	State UT	Zip Code 84201	Transaction ID : <b>SB17-EX1851</b>	
Purpose of Disbursement Tax Payment		Category/ Type <b>001</b>	Tax Payment	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>			Date of Disbursement M M / D D / Y Y Y Y <b>09 / 17 / 2013</b>	
Mailing Address IRS Payment Center			Amount of Each Disbursement this Period <b>2932.43</b>	
City Ogden	State UT	Zip Code 84201	Transaction ID : <b>SB17-EX1901</b>	
Purpose of Disbursement Tax Payment		Category/ Type <b>001</b>	Tax Payment	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Comcast</b>			Date of Disbursement M M / D D / Y Y Y Y <b>07 / 19 / 2013</b>	
Mailing Address PO Box 1005184			Amount of Each Disbursement this Period <b>356.96</b>	
City Atlanta	State GA	Zip Code 30348	Transaction ID : <b>SB17-EX1777</b>	
Purpose of Disbursement Telephone & Internet Service		Category/ Type <b>001</b>	Telephone & Internet Service	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>6353.39</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial)  
**A. Comcast**

Mailing Address PO Box 1005184

City Atlanta State GA Zip Code 30348

Purpose of Disbursement Telephone & Internet Service

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 08 / 19 / 2013

Amount of Each Disbursement this Period: 132.65

Transaction ID : SB17-EX1854

Telephone & Internet Service

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**B. Comcast**

Mailing Address PO Box 1005184

City Atlanta State GA Zip Code 30348

Purpose of Disbursement Telephone & Internet Service

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 08 / 22 / 2013

Amount of Each Disbursement this Period: 132.65

Transaction ID : SB17-EX1858

Telephone & Internet Service

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**c. Comcast**

Mailing Address PO Box 1005184

City Atlanta State GA Zip Code 30348

Purpose of Disbursement Telephone & Internet Service

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 09 / 23 / 2013

Amount of Each Disbursement this Period: 42.32

Transaction ID : SB17-EX1914

Telephone & Internet Service

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... 307.62

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 126			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. FEC Financial Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2013
Mailing Address PO Box 651374		Amount of Each Disbursement this Period 49.83
City Potomac Falls	State VA	Zip Code 20165
Purpose of Disbursement Postage for delivery of paperwork/checks/disks	Category/ Type 001	<b>Transaction ID : SB17-EX1783</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014
State:	District:	Postage for delivery of paperwork/checks/disks

Full Name (Last, First, Middle Initial) <b>B. GA Department Of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2013
Mailing Address 1800 Century Blvd NE		Amount of Each Disbursement this Period 518.64
City Atlanta	State GA	Zip Code 30345
Purpose of Disbursement Tax Payment	Category/ Type 001	<b>Transaction ID : SB17-EX1817</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014
State:	District:	Tax Payment

Full Name (Last, First, Middle Initial) <b>c. GA Department Of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2013
Mailing Address 1800 Century Blvd NE		Amount of Each Disbursement this Period 305.10
City Atlanta	State GA	Zip Code 30345
Purpose of Disbursement Tax Payment	Category/ Type 001	<b>Transaction ID : SB17-EX1818</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014
State:	District:	Tax Payment

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	873.57
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. GA Department Of Revenue</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2013
Mailing Address 1800 Century Blvd NE			Amount of Each Disbursement this Period 518.64
City Atlanta	State GA	Zip Code 30345	
Purpose of Disbursement Tax Payment		Category/ Type 001	<b>Transaction ID : SB17-EX1850</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Tax Payment
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. GA Department Of Revenue</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2013
Mailing Address 1800 Century Blvd NE			Amount of Each Disbursement this Period 491.87
City Atlanta	State GA	Zip Code 30345	
Purpose of Disbursement Tax Payment		Category/ Type 001	<b>Transaction ID : SB17-EX1900</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Tax Payment
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Bankcard Center</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address PO Box 569200			Amount of Each Disbursement this Period 768.04
City Dallas	State TX	Zip Code 75356	
Purpose of Disbursement Credit Card: See Below		Category/ Type 001	<b>Transaction ID : SB17-EX1796</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Credit Card: See Below
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1778.54
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Target</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2013
Mailing Address 235 Robert C Daniel Junior Parkwa		Amount of Each Disbursement this Period 16.83
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX1789
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2013
Mailing Address 2535B Dallas Highway		Amount of Each Disbursement this Period 107.99
City West Marietta	State GA	
Zip Code 30064	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX1790
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2013
Mailing Address 1117 Knox Ave		Amount of Each Disbursement this Period 49.16
City North Augusta	State SC	
Zip Code 29841	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX1791
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Office Supplies
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 525 8th St		Amount of Each Disbursement this Period 92.00
City Augusta	State GA	
Zip Code 30901	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX1792
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Postage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 1117 Knox Ave		Amount of Each Disbursement this Period 41.26
City North Augusta	State SC	
Zip Code 29841	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX1793
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 1030 Delta Blvd		Amount of Each Disbursement this Period 431.80
City Atlanta	State GA	
Zip Code 30320	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX1794
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Air Travel
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 1030 Delta Blvd		Amount of Each Disbursement this Period 29.00
City Atlanta	State GA Zip Code 30320	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	<b>Transaction ID : SB17-EX1795</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Air Travel
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bankcard Center</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address PO Box 569200		Amount of Each Disbursement this Period 161.99
City Dallas	State TX Zip Code 75356	
Purpose of Disbursement Credit Card Paid by Bankcard Center	Category/Type 001	<b>Transaction ID : SB17-EX1803</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Paid by Bankcard Center
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Dropbox</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 185 Berry St 4th Floor		Amount of Each Disbursement this Period 9.99
City San Francisco	State CA Zip Code 94107	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	<b>Transaction ID : SB17-EX1797</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Online Document Storage
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	161.99
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mailchimp</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 512 Means Street Suite 404		Amount of Each Disbursement this Period 50.00
City Atlanta	State GA Zip Code 30318	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	<b>Transaction ID : SB17-EX1798</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Email Marketing Service
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Target</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 235 Robert C Daniel Junior Parkwa		Amount of Each Disbursement this Period 7.17
City Augusta	State GA Zip Code 30909	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	<b>Transaction ID : SB17-EX1799</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 1117 Knox Ave		Amount of Each Disbursement this Period 45.65
City North Augusta	State SC Zip Code 29841	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	<b>Transaction ID : SB17-EX1800</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Office Supplies
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Firehouse Subs</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 1509 Walton Way		Amount of Each Disbursement this Period 43.19
City Augusta	State GA	
Zip Code 30904	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : <b>SB17-EX1801</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Food for staff
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Godaddy.com</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 14455 N. Hayden Rd Ste 219		Amount of Each Disbursement this Period 5.99
City Scottsdale	State AZ	
Zip Code 85260	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : <b>SB17-EX1802</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Website Hosting
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Thomas Gardner</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2013
Mailing Address 5931 Tubman Rd		Amount of Each Disbursement this Period 79.92
City Appling	State GA	
Zip Code 30802	Purpose of Disbursement Reimbursement: See Below	Transaction ID : <b>SB17-EX1762</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Reimbursement: See Below
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	79.92
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cudos</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2013
Mailing Address 1257 Augusta West Pkwy		Amount of Each Disbursement this Period 79.92
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Event name tags	<b>Transaction ID : SB17-EX1763</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Event name tags
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Thomas Gardner</b>		Date of Disbursement MM / DD / YYYY 07 / 12 / 2013
Mailing Address 5931 Tubman Rd		Amount of Each Disbursement this Period 790.64
City Appling	State GA	
Zip Code 30802	Purpose of Disbursement Net Salary	<b>Transaction ID : SB17-EX1768</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Thomas Gardner</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2013
Mailing Address 5931 Tubman Rd		Amount of Each Disbursement this Period 790.64
City Appling	State GA	
Zip Code 30802	Purpose of Disbursement Net Salary	<b>Transaction ID : SB17-EX1821</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Net Salary
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1581.28
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 126		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Thomas Gardner</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2013
Mailing Address 5931 Tubman Rd		Amount of Each Disbursement this Period 58.86
City Appling	State GA	
Zip Code 30802	Purpose of Disbursement Reimbursement: See Below	<b>Transaction ID : SB17-EX1827</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Reimbursement: See Below
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CSRA Republican Women's Club</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2013
Mailing Address PO Box 212071		Amount of Each Disbursement this Period 40.00
City Augusta	State GA	
Zip Code 30917	Purpose of Disbursement Event Tickets	<b>Transaction ID : SB17-EX1828</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Event Tickets
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Walgreens</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2013
Mailing Address 3900 Washington Rd		Amount of Each Disbursement this Period 8.62
City Martinez	State GA	
Zip Code 30907	Purpose of Disbursement Campaign Supplies	<b>Transaction ID : SB17-EX1829</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Campaign Supplies
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	58.86
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2013
Mailing Address 1201 Knox Ave		Amount of Each Disbursement this Period 10.24
City North Augusta	State SC	
Zip Code 29841	Purpose of Disbursement Campaign Supplies	Transaction ID : SB17-EX1830
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Campaign Supplies
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Thomas Gardner</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2013
Mailing Address 5931 Tubman Rd		Amount of Each Disbursement this Period 790.64
City Appling	State GA	
Zip Code 30802	Purpose of Disbursement Net Salary	Transaction ID : SB17-EX1840
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ceteris Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2013
Mailing Address 5909 Peachtree Dunwoody Road Sui		Amount of Each Disbursement this Period 250.00
City Atlanta	State GA	
Zip Code 30328	Purpose of Disbursement Payroll Service	Transaction ID : SB17-EX1747
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Payroll Service
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1040.64
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 126			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ceteris Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2013
Mailing Address 5909 Peachtree Dunwoody Road Sui		Amount of Each Disbursement this Period 50.00
City Atlanta State GA Zip Code 30328	Purpose of Disbursement Payroll Service Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1833  Payroll Service
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ceteris Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2013
Mailing Address 5909 Peachtree Dunwoody Road Sui		Amount of Each Disbursement this Period 50.00
City Atlanta State GA Zip Code 30328	Purpose of Disbursement Payroll Service Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1891  Payroll Service
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Cline X Design</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2013
Mailing Address 1977 Dibble Rd		Amount of Each Disbursement this Period 1600.00
City Aiken State SC Zip Code 29801	Purpose of Disbursement Advertising Photo Shoot Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB17-EX1837  Advertising Photo Shoot
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1700.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gober Hilgers PLLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 2101 Cedar Springs Rd #1050			Amount of Each Disbursement this Period 684.00
City Dallas	State TX	Zip Code 75201	Transaction ID : SB17-EX1788
Purpose of Disbursement Legal Fees		Category/ Type 001	
Candidate Name		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Legal Fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gober Hilgers PLLC</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2013
Mailing Address 2101 Cedar Springs Rd #1050			Amount of Each Disbursement this Period 39.50
City Dallas	State TX	Zip Code 75201	Transaction ID : SB17-EX1835
Purpose of Disbursement Legal Fees		Category/ Type 001	
Candidate Name		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Legal Fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>c. High Hampton Inn</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2013
Mailing Address 1525 Highway 107S			Amount of Each Disbursement this Period 2426.47
City Cashiers	State NC	Zip Code 28717	Transaction ID : SB17-EX1887
Purpose of Disbursement Fundraising Event Fees		Category/ Type 001	
Candidate Name		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fundraising Event Fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3149.97
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. William Wheat</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2013
Mailing Address PO Box 944		Amount of Each Disbursement this Period 1147.39
City Langley	State SC	Zip Code 29834
Purpose of Disbursement Net Salary	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX1770	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>B. William Wheat</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2013
Mailing Address PO Box 944		Amount of Each Disbursement this Period 220.31
City Langley	State SC	Zip Code 29834
Purpose of Disbursement Reimbursement: See Below	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX1772	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Reimbursement: See Below
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Best Buy</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2013
Mailing Address 3667 Walton Way		Amount of Each Disbursement this Period 220.31
City Augusta	State GA	Zip Code 30909
Purpose of Disbursement Computer	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX1773	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Computer
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1367.70
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 93 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. William Wheat</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2013
Mailing Address PO Box 944		Amount of Each Disbursement this Period 1147.39 <b>Transaction ID : SB17-EX1820</b>
City Langley	State SC	
Zip Code 29834	Purpose of Disbursement Net Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Net Salary

Full Name (Last, First, Middle Initial) <b>B. William Wheat</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2013
Mailing Address PO Box 944		Amount of Each Disbursement this Period 1147.39 <b>Transaction ID : SB17-EX1843</b>
City Langley	State SC	
Zip Code 29834	Purpose of Disbursement Net Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Net Salary

Full Name (Last, First, Middle Initial) <b>c. William Wheat</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2013
Mailing Address PO Box 944		Amount of Each Disbursement this Period 1147.39 <b>Transaction ID : SB17-EX1879</b>
City Langley	State SC	
Zip Code 29834	Purpose of Disbursement Net Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Net Salary

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3442.17
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. William Wheat</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2013
Mailing Address PO Box 944		Amount of Each Disbursement this Period 169.00
City Langley	State SC	Zip Code 29834
Purpose of Disbursement Mileage Reimbursement: 338 x .50	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX1886	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Mileage Reimbursement: 338 x .50
State: District:		

Full Name (Last, First, Middle Initial) <b>B. William Wheat</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2013
Mailing Address PO Box 944		Amount of Each Disbursement this Period 1147.39
City Langley	State SC	Zip Code 29834
Purpose of Disbursement Net Salary	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX1894	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>c. William Wheat</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2013
Mailing Address PO Box 944		Amount of Each Disbursement this Period 109.61
City Langley	State SC	Zip Code 29834
Purpose of Disbursement Reimbursement: See Below	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX1911	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Reimbursement: See Below
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1426.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2013
Mailing Address 1117 Knox Ave		Amount of Each Disbursement this Period 9.61
City North Augusta	State SC Zip Code 29841	
Purpose of Disbursement Nametags for Event	Category/Type 001	<b>Transaction ID : SB17-EX1912</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Nametags for Event
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Quiktrip</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2013
Mailing Address 2804 Paces Ferry Road		Amount of Each Disbursement this Period 100.00
City Atlanta	State GA Zip Code 30305	
Purpose of Disbursement Fuel	Category/Type 001	<b>Transaction ID : SB17-EX1913</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Fuel
State: District:		

Full Name (Last, First, Middle Initial) <b>c. William Wheat</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2013
Mailing Address PO Box 944		Amount of Each Disbursement this Period 1147.39
City Langley	State SC Zip Code 29834	
Purpose of Disbursement Net Salary	Category/Type 001	<b>Transaction ID : SB17-EX1941</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Net Salary
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1147.39
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Push Digital</b>		Date of Disbursement MM / DD / YYYY 07 / 03 / 2013
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 4000.00
City Columbia	State SC	Zip Code 29202
Purpose of Disbursement Campaign website	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX1751	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Campaign website
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Push Digital</b>		Date of Disbursement MM / DD / YYYY 07 / 25 / 2013
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 839.37
City Columbia	State SC	Zip Code 29202
Purpose of Disbursement Email Marketing and Fees	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX1811	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Email Marketing and Fees
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Push Digital</b>		Date of Disbursement MM / DD / YYYY 07 / 29 / 2013
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 2000.00
City Columbia	State SC	Zip Code 29202
Purpose of Disbursement Website - July 2013	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX1815	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Website - July 2013
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6839.37
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Push Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2013
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 450.00
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Addition to Campaign Website	<b>Transaction ID : SB17-EX1831</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Addition to Campaign Website
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Push Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2013
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 395.44
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Fee for online donations	<b>Transaction ID : SB17-EX1834</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Fee for online donations
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Push Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2013
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 4000.00
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Campaign website/online advertising	<b>Transaction ID : SB17-EX1844</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Campaign website/online advertising
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4845.44
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Push Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2013
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 76.36
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Email Marketing	<b>Transaction ID : SB17-EX1847</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Email Marketing
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Push Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2013
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 7350.00
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Campaign website	<b>Transaction ID : SB17-EX1855</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Campaign website
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Push Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2013
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 4143.32
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Campaign website/online advertising	<b>Transaction ID : SB17-EX1857</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Campaign website/online advertising
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11569.68
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Push Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2013
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 1964.79
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Campaign Website Fees	<b>Transaction ID : SB17-EX1888</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Campaign Website Fees
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Push Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2013
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 4000.00
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Campaign Website	<b>Transaction ID : SB17-EX1904</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Campaign Website
State: District:		

Full Name (Last, First, Middle Initial) <b>c. DigitalXpress Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2013
Mailing Address 2211 Beaver Ruin Road Ste 170		Amount of Each Disbursement this Period 1831.56
City Norcross	State GA	
Zip Code 30071	Purpose of Disbursement Letterhead and envelopes	<b>Transaction ID : SB17-EX1749</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Letterhead and envelopes
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7796.35
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. DigitalXpress Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2013
Mailing Address 2211 Beaver Ruin Road Ste 170		Amount of Each Disbursement this Period 795.00
City Norcross State GA Zip Code 30071	Purpose of Disbursement Bumper and lapel stickers Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Transaction ID : SB17-EX1823 Bumper and lapel stickers

Full Name (Last, First, Middle Initial) <b>B. DigitalXpress Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2013
Mailing Address 2211 Beaver Ruin Road Ste 170		Amount of Each Disbursement this Period 2098.33
City Norcross State GA Zip Code 30071	Purpose of Disbursement Printing of event invitations Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Transaction ID : SB17-EX1845 Printing of event invitations

Full Name (Last, First, Middle Initial) <b>c. DigitalXpress Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2013
Mailing Address 2211 Beaver Ruin Road Ste 170		Amount of Each Disbursement this Period 645.15
City Norcross State GA Zip Code 30071	Purpose of Disbursement Letterhead Envelopes & Email Blast Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Transaction ID : SB17-EX1863 Letterhead Envelopes & Email Blast

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3538.48
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 126			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. DigitalXpress Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2013
Mailing Address 2211 Beaver Ruin Road Ste 170		Amount of Each Disbursement this Period 120.94
City Norcross State GA Zip Code 30071	Purpose of Disbursement Envelope Printing	Transaction ID : SB17-EX1884
Candidate Name	Category/Type 001	Envelope Printing
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DigitalXpress Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2013
Mailing Address 2211 Beaver Ruin Road Ste 170		Amount of Each Disbursement this Period 687.20
City Norcross State GA Zip Code 30071	Purpose of Disbursement Printing-Business Cards & Bumper Stickers	Transaction ID : SB17-EX1907
Candidate Name	Category/Type 001	Printing-Business Cards & Bumper Stickers
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Right Path Strategic Affairs</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2013
Mailing Address 3960 Rolling Hills Drive		Amount of Each Disbursement this Period 5793.86
City Cumming State GA Zip Code 30041	Purpose of Disbursement Campaign consulting and travel reimbursement	Transaction ID : SB17-EX1786
Candidate Name	Category/Type 001	Campaign consulting and travel reimbursement
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6602.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 126			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Right Path Strategic Affairs</b>			Date of Disbursement MM / DD / YYYY 08 / 06 / 2013	
Mailing Address 3960 Rolling Hills Drive			Amount of Each Disbursement this Period 5162.72	
City Cumming	State GA	Zip Code 30041	Transaction ID : <b>SB17-EX1836</b>	
Purpose of Disbursement Campaign consulting and travel reimbursement		Category/ Type 001	Campaign consulting and travel reimbursement	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Right Path Strategic Affairs</b>			Date of Disbursement MM / DD / YYYY 09 / 05 / 2013	
Mailing Address 3960 Rolling Hills Drive			Amount of Each Disbursement this Period 5000.00	
City Cumming	State GA	Zip Code 30041	Transaction ID : <b>SB17-EX1885</b>	
Purpose of Disbursement Campaign consulting		Category/ Type 001	Campaign consulting	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Tactical Communications Solutions</b>			Date of Disbursement MM / DD / YYYY 07 / 29 / 2013	
Mailing Address 428 Collier Road NW			Amount of Each Disbursement this Period 3000.00	
City Atlanta	State GA	Zip Code 30309	Transaction ID : <b>SB17-EX1816</b>	
Purpose of Disbursement Communication Consulting Fee		Category/ Type 001	Communication Consulting Fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13162.72
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tactical Communications Solutions</b>		Date of Disbursement MM / DD / YYYY <b>08 / 28 / 2013</b>
Mailing Address 428 Collier Road NW		Amount of Each Disbursement this Period 3000.00
City Atlanta State GA Zip Code 30309	Purpose of Disbursement Communication Consulting Fee	<b>Transaction ID : SB17-EX1864</b>
Candidate Name	Category/Type 001	Communication Consulting Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Response</b>		Date of Disbursement MM / DD / YYYY <b>07 / 01 / 2013</b>
Mailing Address 2700 Cumberland Parkway Suite 15		Amount of Each Disbursement this Period 1750.00
City Atlanta State GA Zip Code 30339	Purpose of Disbursement FEC Compliance Consulting	<b>Transaction ID : SB17-EX1745</b>
Candidate Name	Category/Type 001	FEC Compliance Consulting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Response</b>		Date of Disbursement MM / DD / YYYY <b>07 / 19 / 2013</b>
Mailing Address 2700 Cumberland Parkway Suite 15		Amount of Each Disbursement this Period 1750.00
City Atlanta State GA Zip Code 30339	Purpose of Disbursement FEC Compliance Consulting	<b>Transaction ID : SB17-EX1778</b>
Candidate Name	Category/Type 001	FEC Compliance Consulting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capitol Response</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2013
Mailing Address 2700 Cumberland Parkway Suite 15		Amount of Each Disbursement this Period 1750.00
City Atlanta State GA Zip Code 30339	Purpose of Disbursement FEC Compliance Consulting	
Candidate Name		Transaction ID : SB17-EX1849
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:	Category/Type 001	FEC Compliance Consulting

Full Name (Last, First, Middle Initial) <b>B. Capitol Response</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2013
Mailing Address 2700 Cumberland Parkway Suite 15		Amount of Each Disbursement this Period 1750.00
City Atlanta State GA Zip Code 30339	Purpose of Disbursement FEC Compliance Consulting	
Candidate Name		Transaction ID : SB17-EX1906
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:	Category/Type 001	FEC Compliance Consulting

Full Name (Last, First, Middle Initial) <b>C. Creative Direct LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 17 / 2013
Mailing Address The Reagan Building 25 E Main Street		Amount of Each Disbursement this Period 1788.00
City Richmond State VA Zip Code 23219	Purpose of Disbursement Palm Cards/Bumper Stickers	
Candidate Name		Transaction ID : SB17-EX1775
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:	Category/Type 001	Palm Cards/Bumper Stickers

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5288.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Creative Direct LLC</b>			Date of Disbursement MM / DD / YYYY 08 / 13 / 2013
Mailing Address The Reagan Building 25 E Main Street			Amount of Each Disbursement this Period 400.00
City Richmond	State VA	Zip Code 23219	
Purpose of Disbursement Lapel stickers		Category/ Type 001	<b>Transaction ID : SB17-EX1846</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Lapel stickers
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Richard Allen</b>			Date of Disbursement MM / DD / YYYY 07 / 09 / 2013
Mailing Address 2237 Pickens Road			Amount of Each Disbursement this Period 2333.40
City Augusta	State GA	Zip Code 30904	
Purpose of Disbursement Reimbursement: See Below		Category/ Type 001	<b>Transaction ID : SB17-EX1784</b>
Candidate Name Richard W Allen			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		Reimbursement: See Below
State: GA District: 12			

Full Name (Last, First, Middle Initial) <b>c. Augusta Country Club</b>			Date of Disbursement MM / DD / YYYY 07 / 09 / 2013
Mailing Address P.O. Box 3166			Amount of Each Disbursement this Period 2333.40
City Augusta	State GA	Zip Code 30914	
Purpose of Disbursement Fundraising Dinner		Category/ Type 001	<b>Transaction ID : SB17-EX1785</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		<b>[MEMO ITEM]</b> Fundraising Dinner
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2733.40
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Augusta Outdoor Expo</b>			Date of Disbursement M M / D D / Y Y Y Y <b>07 / 23 / 2013</b>
Mailing Address <b>601 7th Street</b>			Amount of Each Disbursement this Period <b>250.00</b>
City <b>Augusta</b>	State <b>GA</b>	Zip Code <b>30901</b>	<b>Transaction ID : SB17-EX1804</b>
Purpose of Disbursement <b>Event Booth</b>		Category/ Type <b>001</b>	
Candidate Name		Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	<b>Event Booth</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Augusta Outdoor Expo</b>			Date of Disbursement M M / D D / Y Y Y Y <b>07 / 26 / 2013</b>
Mailing Address <b>601 7th Street</b>			Amount of Each Disbursement this Period <b>50.00</b>
City <b>Augusta</b>	State <b>GA</b>	Zip Code <b>30901</b>	<b>Transaction ID : SB17-EX1812</b>
Purpose of Disbursement <b>Admission Tickets</b>		Category/ Type <b>001</b>	
Candidate Name		Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	<b>Admission Tickets</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>c. Micky Berardi/CSP</b>			Date of Disbursement M M / D D / Y Y Y Y <b>08 / 19 / 2013</b>
Mailing Address <b>1501 NE 55th Street</b>			Amount of Each Disbursement this Period <b>4590.50</b>
City <b>Ocala</b>	State <b>FL</b>	Zip Code <b>34479</b>	<b>Transaction ID : SB17-EX1856</b>
Purpose of Disbursement <b>Campaign Signs</b>		Category/ Type <b>001</b>	
Candidate Name		Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	<b>Campaign Signs</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4890.50</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A. Card Services Center**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 105025

City Atlanta State GA Zip Code 30348

Purpose of Disbursement  
Credit Card Paid by Card Services Center

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
08 / 28 / 2013

Amount of Each Disbursement this Period  
765.27

Transaction ID : SB17-EX1872

Credit Card Paid by Card Services Center

Category/Type: 001

**B. The Capital Hilton**

Full Name (Last, First, Middle Initial)  
Mailing Address 1001 16th Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
08 / 28 / 2013

Amount of Each Disbursement this Period  
317.10

Transaction ID : SB17-EX1865

[MEMO ITEM]  
Lodging

Category/Type: 001

**c. Dropbox**

Full Name (Last, First, Middle Initial)  
Mailing Address 185 Berry St 4th Floor

City San Francisco State CA Zip Code 94107

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
08 / 28 / 2013

Amount of Each Disbursement this Period  
9.99

Transaction ID : SB17-EX1866

[MEMO ITEM]  
Online Document Storage

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... 765.27

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Murphy USA</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2013
Mailing Address 414 S Main Street		Amount of Each Disbursement this Period 95.85
City Swainsboro State GA Zip Code 30401	Purpose of Disbursement Administrative/Salary/Overhead Expenses 001 Category/Type	
Candidate Name		Transaction ID : SB17-EX1867
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		[MEMO ITEM] Gas

Full Name (Last, First, Middle Initial) <b>B. Hampton Inn Statesboro</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2013
Mailing Address 350 Brampton Avenue		Amount of Each Disbursement this Period 123.17
City Statesboro State GA Zip Code 30458	Purpose of Disbursement Administrative/Salary/Overhead Expenses 001 Category/Type	
Candidate Name		Transaction ID : SB17-EX1868
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		[MEMO ITEM] Lodging

Full Name (Last, First, Middle Initial) <b>c. Hampton Inn Statesboro</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2013
Mailing Address 350 Brampton Avenue		Amount of Each Disbursement this Period 123.17
City Statesboro State GA Zip Code 30458	Purpose of Disbursement Administrative/Salary/Overhead Expenses 001 Category/Type	
Candidate Name		Transaction ID : SB17-EX1869
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		[MEMO ITEM] Lodging

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Godaddy.com</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2013
Mailing Address 14455 N. Hayden Rd Ste 219		Amount of Each Disbursement this Period 5.99
City Scottsdale	State AZ	
Zip Code 85260	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX1870
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Website Hosting
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Georgia Chamber Of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2013
Mailing Address 270 Peachtree Street NW Suite 2200		Amount of Each Disbursement this Period 90.00
City Atlanta	State GA	
Zip Code 30303	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX1871
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] 2013 Congressional Luncheon
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Card Services Center</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2013
Mailing Address PO Box 105025		Amount of Each Disbursement this Period 56.95
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Credit Card Paid by Card Services Center	Transaction ID : SB17-EX1875
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Paid by Card Services Center
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	56.95
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Chatters</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2013
Mailing Address 6774 NW Broad St		Amount of Each Disbursement this Period 27.00
City Lyons	State GA Zip Code 30436	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		<b>Transaction ID : SB17-EX1873</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Meal
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2013
Mailing Address 1117 Knox Ave		Amount of Each Disbursement this Period 29.95
City North Augusta	State SC Zip Code 29841	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		<b>Transaction ID : SB17-EX1874</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Card Services Center</b>		Date of Disbursement MM / DD / YYYY 09 / 24 / 2013
Mailing Address PO Box 105025		Amount of Each Disbursement this Period 1472.77
City Atlanta	State GA Zip Code 30348	
Purpose of Disbursement Credit Card Paid by Card Services Center		<b>Transaction ID : SB17-EX1928</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Paid by Card Services Center
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1472.77
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dropbox</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2013
Mailing Address 185 Berry St 4th Floor		Amount of Each Disbursement this Period 9.99
City San Francisco	State CA Zip Code 94107	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	<b>Transaction ID : SB17-EX1915</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Online Document Storage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Neighbors Express</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2013
Mailing Address 1108 N. Jefferson Street		Amount of Each Disbursement this Period 108.68
City Dublin	State GA Zip Code 31021	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	<b>Transaction ID : SB17-EX1916</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Fuel
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2013
Mailing Address 1117 Knox Ave		Amount of Each Disbursement this Period 74.89
City North Augusta	State SC Zip Code 29841	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	<b>Transaction ID : SB17-EX1917</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Toner Cartridge
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2013
Mailing Address 1201 Knox Ave		Amount of Each Disbursement this Period 46.00
City North Augusta	State SC Zip Code 29841	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	<b>Transaction ID : SB17-EX1918</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Postage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2013
Mailing Address 525 8th St		Amount of Each Disbursement this Period 276.00
City Augusta	State GA Zip Code 30901	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	<b>Transaction ID : SB17-EX1919</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Postage
State: District:		

Full Name (Last, First, Middle Initial) <b>c. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2013
Mailing Address 262 Robert C. Daniel Jr. Pkwy		Amount of Each Disbursement this Period 43.19
City Augusta	State GA Zip Code 30909	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	<b>Transaction ID : SB17-EX1920</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Event Printing & Posters
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2013
Mailing Address 1117 Knox Ave		Amount of Each Disbursement this Period 146.50
City North Augusta	State SC	
Zip Code 29841	Purpose of Disbursement Administrative/Salary/Overhead Expenses	<b>Transaction ID : SB17-EX1921</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Toner Cartridge & Labels
State: District:		

Full Name (Last, First, Middle Initial) <b>B. H.H. Gregg</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2013
Mailing Address 207 Robert C. Daniel Jr. Parkway		Amount of Each Disbursement this Period 345.58
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	<b>Transaction ID : SB17-EX1922</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Office Equipment
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jason's Deli</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2013
Mailing Address 3330 Piedmont		Amount of Each Disbursement this Period 68.93
City Atlanta	State GA	
Zip Code 30305	Purpose of Disbursement Administrative/Salary/Overhead Expenses	<b>Transaction ID : SB17-EX1923</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Lunch for Staff
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staybridge Suites</b>		Date of Disbursement MM / DD / YYYY 09 / 24 / 2013	
Mailing Address 540 Pharr Road		Amount of Each Disbursement this Period 270.00	
City Atlanta	State GA	Zip Code 30305	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001		
Candidate Name		Transaction ID : SB17-EX1924  [MEMO ITEM] Lodging	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Godaddy.com</b>		Date of Disbursement MM / DD / YYYY 09 / 24 / 2013	
Mailing Address 14455 N. Hayden Rd Ste 219		Amount of Each Disbursement this Period 62.02	
City Scottsdale	State AZ	Zip Code 85260	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001		
Candidate Name		Transaction ID : SB17-EX1925  [MEMO ITEM] 2 Year Website Renewal	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Godaddy.com</b>		Date of Disbursement MM / DD / YYYY 09 / 24 / 2013	
Mailing Address 14455 N. Hayden Rd Ste 219		Amount of Each Disbursement this Period 5.99	
City Scottsdale	State AZ	Zip Code 85260	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001		
Candidate Name		Transaction ID : SB17-EX1926  [MEMO ITEM] Website Hosting	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Americans For Prosperity Foundation</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2013
Mailing Address 44 Darby's Crossing Drive		Amount of Each Disbursement this Period 15.00
City Hiram	State GA	
Zip Code 30141	Purpose of Disbursement Administrative/Salary/Overhead Expenses	<b>Transaction ID : SB17-EX1927</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Event Ticket
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Card Services Center</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2013
Mailing Address PO Box 105025		Amount of Each Disbursement this Period 476.22
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Credit Card Paid by Card Services Center	<b>Transaction ID : SB17-EX1935</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Paid by Card Services Center
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Party City</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2013
Mailing Address 249 Robert C Daniel Jr Pkwy		Amount of Each Disbursement this Period 21.93
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	<b>Transaction ID : SB17-EX1929</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Candy for Event
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	476.22
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

**A. USPS**

Full Name (Last, First, Middle Initial)  
Mailing Address 525 8th St

City Augusta State GA Zip Code 30901

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 09 / 24 / 2013

Amount of Each Disbursement this Period: 276.00

Transaction ID : SB17-EX1930

**[MEMO ITEM]**  
Postage

**B. USPS**

Full Name (Last, First, Middle Initial)  
Mailing Address 525 8th St

City Augusta State GA Zip Code 30901

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 09 / 24 / 2013

Amount of Each Disbursement this Period: 92.00

Transaction ID : SB17-EX1931

**[MEMO ITEM]**  
Postage

**c. Office Depot**

Full Name (Last, First, Middle Initial)  
Mailing Address 1117 Knox Ave

City North Augusta State SC Zip Code 29841

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 09 / 24 / 2013

Amount of Each Disbursement this Period: 14.96

Transaction ID : SB17-EX1932

**[MEMO ITEM]**  
Paper

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2013
Mailing Address 246 Robert C. Daniels Jr. Pkwy		Amount of Each Disbursement this Period 468.70
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX1933
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NationBuilder</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2013
Mailing Address 448 S Hill Street #200		Amount of Each Disbursement this Period 19.00
City Los Angeles	State CA	
Zip Code 90013	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX1934
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Campaign Software
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Robert Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2013
Mailing Address 1428 Mohawk Drive		Amount of Each Disbursement this Period 468.70
City West Columbia	State SC	
Zip Code 29169	Purpose of Disbursement Net Salary	Transaction ID : SB17-EX1880
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Net Salary
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	468.70
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2013
Mailing Address 1428 Mohawk Drive		Amount of Each Disbursement this Period 790.64
City West Columbia	State SC	
Purpose of Disbursement Net Salary	Zip Code 29169	<b>Transaction ID : SB17-EX1899</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Robert Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2013
Mailing Address 1428 Mohawk Drive		Amount of Each Disbursement this Period 232.96
City West Columbia	State SC	
Purpose of Disbursement Reimbursement: See Below	Zip Code 29169	<b>Transaction ID : SB17-EX1902</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Reimbursement: See Below
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Hampton Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2013
Mailing Address 3303 US Hwy 280 E		Amount of Each Disbursement this Period 232.96
City Vidalia	State GA	
Purpose of Disbursement Lodging	Zip Code 30474	<b>Transaction ID : SB17-EX1903</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	<b>[MEMO ITEM]</b> Lodging
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1023.60
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Rick W. Allen for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2013
Mailing Address 1428 Mohawk Drive		Amount of Each Disbursement this Period 790.64
City West Columbia	State SC	
Zip Code 29169	Purpose of Disbursement Net Salary	Transaction ID : SB17-EX1942
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Chambliss For Senate</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2013
Mailing Address P.O. Box 12469		Amount of Each Disbursement this Period 390.65
City Atlanta	State GA	
Zip Code 30355	Purpose of Disbursement IN-KIND RECEIVED Food and Beverage for Fundraising Reception	Transaction ID : SB17-CN1383
Candidate Name <b>Chambliss For Senate</b>	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	In-Kind Received Food and Beverage for Fundraising Reception
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1181.29
<b>TOTAL</b> This Period (last page this line number only).....	145261.41

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10-LN1

Rick W. Allen for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Richard Allen

Primary

General

Other (specify) ▼

Mailing Address  
2237 Pickens Rd

City State ZIP Code  
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
50000 .00 50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

10

11

2011

01

08

2012

0.00

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 50000.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10-LN2

Rick W. Allen for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Richard Allen

[PERSONAL FUNDS]

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
2237 Pickens Rd

City State ZIP Code  
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
30000 .00 30000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 12 / D 31 / Y 2011 M 01 / D 08 / Y 2013 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 30000.00  
**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10-LN3

Rick W. Allen for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Richard Allen

Primary

General

Other (specify) ▼

Mailing Address  
2237 Pickens Rd

City State ZIP Code  
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
20000 .00 20000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

03

30

2012

01

08

2013

0.00

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 20000.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10-LN5

Rick W. Allen for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Richard Allen

Primary  
 General  
 Other (specify) ▼

Mailing Address  
2237 Pickens Rd

City State ZIP Code  
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
150000 .00 150000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 07 / D 11 / Y 2012 M 01 / D 01 / Y 2013 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 150000.00  
**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Rick W. Allen for Congress** Transaction ID : **SC10-LN7**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012  
**Richard Allen**  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
2237 Pickens Rd

City State ZIP Code  
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
 250000 .00 250000.00

**TERMS** Date Incurred Date Due Interest Rate Secured:  
 08 / 02 / 2012 01 / 01 / 2013 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 250000.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10-LN10

Rick W. Allen for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Richard Allen

Primary  
 General  
 Other (specify) ▼

Mailing Address  
2237 Pickens Rd

City State ZIP Code  
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
20000 .00 20000.00

TERMS

Date Incurred Date Due Interest Rate Secured:  
M 10 / D 15 / Y 2012 M 01 / D 01 / Y 2014 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ..... 20000.00  
TOTALS This Period (last page in this line only) .....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10-LN11

Rick W. Allen for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Richard Allen

Primary

General

Other (specify) ▼

Mailing Address  
2237 Pickens Rd

City State ZIP Code  
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
10000 .00 10000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

05

21

2013

01

01

2014

0.00

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 10000.00  
**TOTALS** This Period (last page in this line only)..... 530000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.