

**FEC FORM 3**

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For An Authorized Committee

SECRETARY OF THE SENATE

15 APR 20 AM 11:54

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Nunn for Senate

ADDRESS (number and street)

P.O. Box 78936

Check if different than previously reported. (ACC)

Atlanta

GA

30357

2. FEC IDENTIFICATION NUMBER ▼

C C00547414

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

GA

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

X April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on M M

Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on M M

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
01 01 / 2015

through

M M / D D / Y Y  
03 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer James Grien

Signature of Treasurer

James Grien

Date

M M / D D / Y Y  
04 13 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

**FEC FORM 3**  
(Revised 02/2003)

FESAN018

15020162190

**SUMMARY PAGE**

of Receipts and Disbursements

Write or Type Committee Name  
**Nunn for Senate**

Report Covering the Period: From: 

M	M
01	

 / 

D	D
01	

 / 

Y	Y	Y	Y
2015			

 To: 

M	M
03	

 / 

D	D
31	

 / 

Y	Y	Y	Y
2015			

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ...	125.05	23805.64
(b) Total Contribution Refunds (from Line 20(d)) ...	17485.00	45813.66
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	-17359.95	-22008.02
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	83983.97	166662.70
(b) Total Offsets to Operating Expenditures (from Line 14)...	83767.91	84985.30
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	216.06	81677.40
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	5182.83	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ...</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ...</b>	7672.76	

**For further information contact:**

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

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

15020162191

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 28

Write or Type Committee Name

Nunn for Senate

Report Covering the Period: From: 

M	M	M
0	1	

 / 

D	D
0	1

 / 

Y	Y	Y	Y	Y	Y
2	0	1	5		

 To: 

M	M	M
0	3	

 / 

D	D
3	1

 / 

Y	Y	Y	Y	Y	Y
2	0	1	5		

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	0.00	10500.00
(i) Itemized (use Schedule A)...	125.05	10555.64
(ii) Unitemized.....	125.05	21055.64
(iii) TOTAL of contributions from individuals .	0.00	0.00
(b) Political Party Committees...	0.00	2750.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) The Candidate.....	125.05	23805.64
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5500.00	32514.44
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0.00	0.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ...	83767.91	84985.30
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	4917.72
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	89392.96	146223.10

15020162192

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES...	83983.97	166662.70
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ...	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	6485.00	34813.66
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	11000.00	11000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	17485.00	45813.66
21. OTHER DISBURSEMENTS ...	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	101468.97	212476.36

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	17258.84
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	89392.96
25. SUBTOTAL (add Line 23 and Line 24)...	106651.80
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	101468.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	5182.83

15020162195

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

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

FOR LINE NUMBER: PAGE 5 OF 28  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Nunn for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**Nunn Senate Victory**

Mailing Address **120 Maryland Avenue, NE**

City **Washington** State **DC** Zip Code **20002**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
**5500.00**

Date of Receipt  
**02 / 28 / 2015**

Transaction ID : **C6202079**

Amount of Each Receipt this Period  
**5500.00**

**Nunn Senate Victory Joint Proceeds**

**B.** 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

Amount of Each Receipt this Period

**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

Amount of Each Receipt this Period

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

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

**5500.00**

**5500.00**

15020162194

**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 28

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Nunn for Senate**

Full Name (Last, First, Middle Initial)  
**Amazon.com**

Mailing Address **1200 12th Ave S  
Ste 1200**

City **Seattle** State **WA** Zip Code **98144-2734**

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

5373.90

Date of Receipt

MM / DD / YYYY  
01 / 21 / 2015

Transaction ID : C6202077

Amount of Each Receipt this Period

1922.67

Full Name (Last, First, Middle Initial)  
**Amazon.com**

Mailing Address **1200 12th Ave S  
Ste 1200**

City **Seattle** State **WA** Zip Code **98144-2734**

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

5373.90

Date of Receipt

MM / DD / YYYY  
03 / 24 / 2015

Transaction ID : C6202080

Amount of Each Receipt this Period

3451.23

Full Name (Last, First, Middle Initial)  
**Canal Partners Media**

Mailing Address **25 Whitlock PI SW  
Ste 201**

City **Marietta** State **GA** Zip Code **30064-3142**

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

76879.67

Date of Receipt

MM / DD / YYYY  
01 / 21 / 2015

Transaction ID : C6202076

Amount of Each Receipt this Period

22300.00

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

27673.90

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

15020162195

**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 28
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Nunn for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**Canal Partners Media**

Mailing Address 25 Whitlock PI SW  
Ste 201

City Marietta State GA Zip Code 30064-3142

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt MM / DD / YYYY  
02 / 05 / 2015

Transaction ID : C6202078

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Canal Partners Media**

Mailing Address 25 Whitlock PI SW  
Ste 201

City Marietta State GA Zip Code 30064-3142

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt MM / DD / YYYY  
03 / 04 / 2015

Transaction ID : C6202083

Amount of Each Receipt this Period

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

Mailing Address 25 Whitlock PI SW  
Ste 201

City Marietta State GA Zip Code 30064-3142

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt MM / DD / YYYY  
03 / 25 / 2015

Transaction ID : C6202084

Amount of Each Receipt this Period

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

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

15020162196

**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 28

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Nunn for Senate**

Full Name (Last, First, Middle Initial)  
**Comcast**

Mailing Address P.O. Box 530098

City	State	Zip Code
Atlanta	GA	30353

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 212.56

Date of Receipt

MM / DD / YYYY  
 01 / 20 / 2015

Transaction ID : C6049893

Amount of Each Receipt this Period

212.56

Full Name (Last, First, Middle Initial)  
**Georgia Power**

Mailing Address 96 Annex

City	State	Zip Code
Atlanta	GA	30396

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1396.72

Date of Receipt

MM / DD / YYYY  
 02 / 05 / 2015

Transaction ID : C6061855

Amount of Each Receipt this Period

773.73

Full Name (Last, First, Middle Initial)  
**US Bank**

Mailing Address P.O. Box 790117

City	State	Zip Code
Saint Louis	MO	63179

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 430.44

Date of Receipt

MM / DD / YYYY  
 03 / 31 / 2015

Transaction ID : C6202085

Amount of Each Receipt this Period

430.44

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

1416.73

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

83670.30

15020162197



**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)

<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)  
Nunn for Senate

Full Name (Last, First, Middle Initial) <b>A. Aetna</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2015
Mailing Address P.O. Box 7247-0213		Amount of Each Disbursement this Period 1027.00 Transaction ID : D429349
City Philadelphia	State PA Zip Code 19170	
Purpose of Disbursement Insurance	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Aetna</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2015
Mailing Address P.O. Box 7247-0213		Amount of Each Disbursement this Period 848.00 Transaction ID : D429365
City Philadelphia	State PA Zip Code 19170	
Purpose of Disbursement Insurance	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Atlanta Sign Services</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2015
Mailing Address 4705-C Bakers Ferry Road		Amount of Each Disbursement this Period 1250.00 Transaction ID : D429364
City Atlanta	State GA Zip Code 30336	
Purpose of Disbursement Printing	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3125.00
<b>TOTAL</b> This Period (last page this line number only).....	

15020162198

**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)

<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)  
**Nunn for Senate**

Full Name (Last, First, Middle Initial)

**A. Blue Wave Political Partners, LLC**

Mailing Address 29 Briarwood Drive

City Ringgold State GA Zip Code 30736

Purpose of Disbursement  
Compliance Services

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM/DD/YYYY  
01/15/2015

Amount of Each Disbursement this Period

6000.00

Transaction ID : D429350

Category/  
Type

**B. Campaign Finance Consultants**

Mailing Address 10 G St NE  
S470

City Washington State DC Zip Code 20002-4213

Purpose of Disbursement  
Consulting/Fundraising

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM/DD/YYYY  
02/05/2015

Amount of Each Disbursement this Period

12579.49

Transaction ID : D429358

Category/  
Type

**C. Delta Airlines**

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354

Purpose of Disbursement  
Air Travel - reimbursed to Monica Dixon

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM/DD/YYYY  
02/05/2015

Amount of Each Disbursement this Period

1024.20

Transaction ID : D429404

[MEMO ITEM]

Category/  
Type

SUBTOTAL of Disbursements This Page (optional).....

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

18579.49

15020162199

**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)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Nunn for Senate

**A. First Data**

Full Name (Last, First, Middle Initial)

Mailing Address 5565 Glenridge Connector NE Ste 2000

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement Merchant Bank Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 03 / 2015

Amount of Each Disbursement this Period: 73.52

Transaction ID : D429356

Category/Type

**B. First Data**

Full Name (Last, First, Middle Initial)

Mailing Address 5565 Glenridge Connector NE Ste 2000

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement Merchant Bank Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
01 / 05 / 2015

Amount of Each Disbursement this Period: 459.07

Transaction ID : D429347

Category/Type

**C. First Data**

Full Name (Last, First, Middle Initial)

Mailing Address 5565 Glenridge Connector NE Ste 2000

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement Merchant Bank Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 03 / 2015

Amount of Each Disbursement this Period: 131.75

Transaction ID : D429378

Category/Type

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

664.34

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

15020162200

**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 12 OF 28			
	<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)  
**Nunn for Senate**

Full Name (Last, First, Middle Initial) <b>A. Georgia Power</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2015
Mailing Address 96 Annex		Amount of Each Disbursement this Period 773.73 Transaction ID : D429352
City Atlanta	State GA Zip Code 30396	
Purpose of Disbursement Utilities	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NGP Van, Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 30 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 750.00 Transaction ID : D429381
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement Software	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Patriot Agricultural Services, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 999		Amount of Each Disbursement this Period 604.41 Transaction ID : D429376
City Perry	State GA Zip Code 99999	
Purpose of Disbursement Printing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2128.14
TOTAL This Period (last page this line number only).....	

15020162201

**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 13 OF 28			
	<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)  
**Nunn for Senate**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 02 / 10 / 2015
Mailing Address 600 Town Park Lane Suite 100		Amount of Each Disbursement this Period 271.20 Transaction ID : D429366
City Kennesaw	State GA	
Purpose of Disbursement Payroll Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2015
Mailing Address 600 Town Park Lane Suite 100		Amount of Each Disbursement this Period 300.89 Transaction ID : D429348
City Kennesaw	State GA	
Purpose of Disbursement Payroll Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Perkins Coie</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2015
Mailing Address 700 Thirteenth Street N.W.		Amount of Each Disbursement this Period 15016.50 Transaction ID : D429361
City Washington	State DC	
Purpose of Disbursement Legal Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15588.59
<b>TOTAL</b> This Period (last page this line number only).....	

15020162202

**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 14 OF 28	
	<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)  
**Nunn for Senate**

Full Name (Last, First, Middle Initial) <b>A. SunTrust Bank</b>		Date of Disbursement MM / DD / YYYY 01 / 22 / 2015
Mailing Address 1503 Peachtree St NE		Amount of Each Disbursement this Period 142.49 Transaction ID : D429355
City Atlanta	State GA Zip Code 30309-2909	
Purpose of Disbursement Bank Fees	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SunTrust Bank</b>		Date of Disbursement MM / DD / YYYY 03 / 19 / 2015
Mailing Address 1503 Peachtree St NE		Amount of Each Disbursement this Period 131.95 Transaction ID : D429379
City Atlanta	State GA Zip Code 30309-2909	
Purpose of Disbursement Bank Fees	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SunTrust Bank</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 1503 Peachtree St NE		Amount of Each Disbursement this Period 133.51 Transaction ID : D429390
City Atlanta	State GA Zip Code 30309-2909	
Purpose of Disbursement Bank Fees	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	407.95
<b>TOTAL</b> This Period (last page this line number only).....	

15020162203

**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 15 OF 28

<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)  
**Nunn for Senate**

Full Name (Last, First, Middle Initial) <b>A. Trilogy Interactive LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 19 / 2015
Mailing Address PO Box 4177		Amount of Each Disbursement this Period 3186.20 Transaction ID : D429380
City Mountain View	State CA	
Zip Code 94040	Purpose of Disbursement Internet Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. U.S. Postmaster</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2015
Mailing Address 1072 W Peachtree St NW		Amount of Each Disbursement this Period 66.00 Transaction ID : D429354
City Atlanta	State GA	
Zip Code 30309-3804	Purpose of Disbursement Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. U.S. Postmaster</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2015
Mailing Address 1072 W Peachtree St NW		Amount of Each Disbursement this Period 294.54 Transaction ID : D429407
City Atlanta	State GA	
Zip Code 30309-3804	Purpose of Disbursement Postage reimbursed to Jamie Timmie	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	31252.20
<b>TOTAL</b> This Period (last page this line number only).....	

15020162204

**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 16 OF 28			
	<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)  
**Nunn for Senate**

Full Name (Last, First, Middle Initial) <b>A. United Business Insurance Company</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2015
Mailing Address 350 Franklin Road Suite 330		Amount of Each Disbursement this Period 1894.00 Transaction ID : D429362
City Marietta	State GA	
Purpose of Disbursement Insurance	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Bank</b>		Date of Disbursement MM / DD / YYYY 01 / 30 / 2015
Mailing Address P.O. Box 790117		Amount of Each Disbursement this Period 5362.10 Transaction ID : D429389
City Saint Louis	State MO	
Purpose of Disbursement Auto Travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. US Bank</b>		Date of Disbursement MM / DD / YYYY 01 / 30 / 2015
Mailing Address P.O. Box 790117		Amount of Each Disbursement this Period 496.71 Transaction ID : D429392
City Saint Louis	State MO	
Purpose of Disbursement Auto Travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7752.81
<b>TOTAL</b> This Period (last page this line number only).....	

15020162205



**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 17 OF 28

<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)  
**Nunn for Senate**

Full Name (Last, First, Middle Initial) <b>A. Jamie Timmie</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2015
Mailing Address PO Box 78936		Amount of Each Disbursement this Period 294.54 Transaction ID : D429353
City Atlanta	State GA	
Zip Code 30357-2936	Purpose of Disbursement Reimbursement - See Details	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Monica Dixon</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2015
Mailing Address 5113 Duvall Dr		Amount of Each Disbursement this Period 1116.83 Transaction ID : D429360
City Bethesda	State MD	
Zip Code 20816-1877	Purpose of Disbursement Reimbursement - See Details	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Lora Haggard</b>		Date of Disbursement MM / DD / YYYY 03 / 30 / 2015
Mailing Address 29 Briarwood Drive		Amount of Each Disbursement this Period 544.34 Transaction ID : D429382
City Ringgold	State GA	
Zip Code 30736	Purpose of Disbursement Reimbursement - See Details	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1955.71
TOTAL This Period (last page this line number only).....	

15020162206

**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)

<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)  
**Nunn for Senate**

Full Name (Last, First, Middle Initial)

**A. Fedex Office**

Mailing Address 1375 Peachtree Street

City Atlanta State GA Zip Code 30309

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 30 / 2015

Amount of Each Disbursement this Period

444.21

Transaction ID : D429400

[MEMO ITEM]

**B. U.S. Postmaster**

Mailing Address 1072 W Peachtree St NW

City Atlanta State GA Zip Code 30309-3804

Purpose of Disbursement  
Shipping

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 30 / 2015

Amount of Each Disbursement this Period

70.13

Transaction ID : D429401

[MEMO ITEM]

**C. Ms. Valeria MacPhail**

Mailing Address PO Box 724264

City Atlanta State GA Zip Code 31139-1264

Purpose of Disbursement  
Reimbursement - See Details

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 30 / 2015

Amount of Each Disbursement this Period

769.10

Transaction ID : D429388

SUBTOTAL of Disbursements This Page (optional).....

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

769.10

15020162207

**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)

<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)  
Nunn for Senate

Full Name (Last, First, Middle Initial)

**A. Hyatt Regency**

Mailing Address 265 Peachtree Street, NE

City Atlanta State GA Zip Code 30303

Purpose of Disbursement  
Meeting Expense

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM 03	DD 30	YYYY 2015
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Amount of Each Disbursement this Period

769.10
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Transaction ID : D429403

[MEMO ITEM]

Category/  
Type

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
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Amount of Each Disbursement this Period

--

Category/  
Type

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
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Amount of Each Disbursement this Period

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Category/  
Type

SUBTOTAL of Disbursements This Page (optional).....

0.00
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TOTAL This Period (last page this line number only).....

82223.33
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15020162208

**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 20 OF 28
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Nunn for Senate**

Full Name (Last, First, Middle Initial) <b>A. Burleigh Arnold</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2015
Mailing Address 855 Manning Ave		Amount of Each Disbursement this Period 100.00 Transaction ID : D426201
City Los Angeles	State CA	
Zip Code 90024-3216	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Catherine F. Buttenweiser</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 200 Marsh St		Amount of Each Disbursement this Period 500.00 Transaction ID : D429370
City Belmont	State MA	
Zip Code 02478-2133	Purpose of Disbursement Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. William Davis</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2015
Mailing Address 740 Gladstone Rd		Amount of Each Disbursement this Period 100.00 Transaction ID : D426200
City Atlanta	State GA	
Zip Code 30318-1712	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

15020162209

**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)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Nunn for Senate

Full Name (Last, First, Middle Initial) <b>A. James Glasser</b>		Date of Disbursement MM / DD / YYYY 02 / 10 / 2015
Mailing Address 13262 E. Saddlerock Rd.		Amount of Each Disbursement this Period 250.00 Transaction ID : D429391
City Tucson	State AZ	
Purpose of Disbursement Refund	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Langdale Vallotton, LLP</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address PO Box 1547		Amount of Each Disbursement this Period 400.00 Transaction ID : D429371
City Valdosta	State GA	
Purpose of Disbursement Refund	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Philip Munger</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 40 5th Ave # 11C		Amount of Each Disbursement this Period 2600.00 Transaction ID : D429375
City New York	State NY	
Purpose of Disbursement Refund	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3250.00
<b>TOTAL</b> This Period (last page this line number only).....	

15020162210

**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)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Nunn for Senate

Full Name (Last, First, Middle Initial) <b>A. Elizabeth A Pattullo</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 25 Wildwood St		Amount of Each Disbursement this Period 500.00 Transaction ID : D429368
City Winchester	State MA	
Purpose of Disbursement Refund	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nancy F Terrill</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 2474 Kingsley Dr		Amount of Each Disbursement this Period 1925.00 Transaction ID : D429372
City Macon	State GA	
Purpose of Disbursement Refund	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement	Candidate Name	Category/ Type
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:		

SUBTOTAL of Disbursements This Page (optional).....	2425.00
TOTAL This Period (last page this line number only).....	6375.00

15020162211

**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)

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Nunn for Senate**

Full Name (Last, First, Middle Initial) <b>A. America Works PAC</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address PO Box 76187		Amount of Each Disbursement this Period 5000.00
City Washington	State DC	
Zip Code 20013-6187	Purpose of Disbursement Refund	Transaction ID : D429373
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Moving America Forward PAC</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 972 W Whitmire Dr		Amount of Each Disbursement this Period 1000.00
City Melbourne	State FL	
Zip Code 32935-6972	Purpose of Disbursement Refund	Transaction ID : D429369
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Oceans PAC</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 700 13th St NW Ste 600		Amount of Each Disbursement this Period 5000.00
City Washington	State DC	
Zip Code 20005-3960	Purpose of Disbursement Refund	Transaction ID : D429374
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	11000.00

15020162212

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Nunn for Senate**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**ADT Security**  
 Nature of Debt (Purpose):  
 Security

Mailing Address 8607 Roberts Dr

City State Zip Code  
 Atlanta GA 30350

Outstanding Balance Beginning This Period  
 61.09  
 Transaction ID : D425230

Amount Incurred This Period 0.00  
 Payment This Period 61.09  
 Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Aetna**  
 Nature of Debt (Purpose):  
 Insurance

Mailing Address P.O. Box 7247-0213

City State Zip Code  
 Philadelphia PA 19170

Outstanding Balance Beginning This Period  
 1027.00  
 Transaction ID : D425231

Amount Incurred This Period 0.00  
 Payment This Period 1027.00  
 Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Auto-Owners Insurance**  
 Nature of Debt (Purpose):  
 Insurance

Mailing Address P.O. Box 30315

City State Zip Code  
 Lansing MI 48909

Outstanding Balance Beginning This Period  
 0.00  
 Transaction ID : D429396

Amount Incurred This Period 7672.76  
 Payment This Period 0.00  
 Outstanding Balance at Close of This Period 7672.76

1) <b>SUBTOTALS</b> This Period This Page (optional) ...	7672.76
2) <b>TOTALS</b> This Period (last page this line number only) ...	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)...	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

15020162213



**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Nunn for Senate**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Blue Wave Political Partners, LLC**  
 Nature of Debt (Purpose):  
 Compliance Services  
 Mailing Address 29 Briarwood Drive  
 City State Zip Code  
 Ringgold GA 30736

Transaction ID : D421961  
 Outstanding Balance Beginning This Period 6000.00  
 Amount Incurred This Period 0.00  
 Payment This Period 6000.00  
 Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Monica Dixon**  
 Nature of Debt (Purpose):  
 Travel Reimbursement  
 Mailing Address 5113 Duvall Dr  
 City State Zip Code  
 Bethesda MD 20816-1877

Transaction ID : D421959  
 Outstanding Balance Beginning This Period 1116.83  
 Amount Incurred This Period 0.00  
 Payment This Period 1116.83  
 Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Georgia Power**  
 Nature of Debt (Purpose):  
 Utilities  
 Mailing Address 96 Annex  
 City State Zip Code  
 Atlanta GA 30396

Transaction ID : D425232  
 Outstanding Balance Beginning This Period 773.73  
 Amount Incurred This Period 0.00  
 Payment This Period 773.73  
 Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) ...	0.00
2) <b>TOTALS</b> This Period (last page this line number only) ...	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)...	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

15020162214

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Nunn for Senate**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Perkins Coie**  
 Nature of Debt (Purpose):  
 Legal Fees  
 Mailing Address 700 Thirteenth Street N.W.  
 City State Zip Code  
 Washington DC 20005

Outstanding Balance Beginning This Period Transaction ID : D421958  
  
 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Jamie Timmie**  
 Nature of Debt (Purpose):  
 Postage Reimbursement  
 Mailing Address PO Box 78936  
 City State Zip Code  
 Atlanta GA 30357-2936

Outstanding Balance Beginning This Period Transaction ID : D425233  
  
 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Trilogy Interactive LLC**  
 Nature of Debt (Purpose):  
 Digital Ads/Internet Services  
 Mailing Address PO Box 4177  
 City State Zip Code  
 Mountain View CA 94040

Outstanding Balance Beginning This Period Transaction ID : D425224  
  
 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) ...	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) ...	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)...	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

15020162215

**FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION**

**Form/Schedule:** SD10  
**Transaction ID :** D425224

Refunds applied directly to outstanding bill - Debt adjusted to reflect revised invoice.

**Form/Schedule:**  
**Transaction ID:**

15020162216

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Nunn for Senate**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>US Bank</b>		Nature of Debt (Purpose): Auto Travel
Mailing Address P.O. Box 790117		
City	State	Zip Code
Saint Louis	MO	63179

Outstanding Balance Beginning This Period 496.71		Transaction ID : D425229	
Amount Incurred This Period 0.00	Payment This Period 496.71	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

1) <b>SUBTOTALS</b> This Period This Page (optional) ...	0.00
2) <b>TOTALS</b> This Period (last page this line number only) ...	7672.76
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)...	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	7672.76

15020162217



# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

**4/15/15**

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

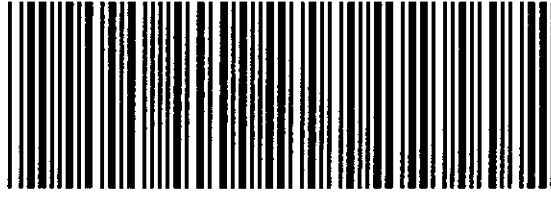
POSTMARK ILLEGIBLE  POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

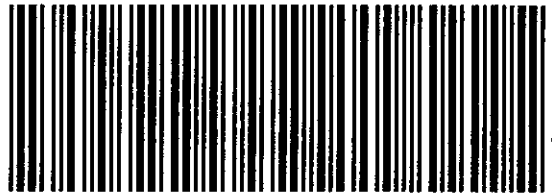
OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER **MN** DATE PREPARED **4/20/15**

15020162219



SEN PATCH



SEN PATCH

15020162220