

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
THE LOOSE GROUP

ADDRESS (number and street) PO Box 78093
 Check if different than previously reported. (ACC) Atlanta GA 30357

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00010793 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2014 through 09 / 30 / 2014

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 Mr. James Baker

Signature of Treasurer Mr. James Baker [Electronically Filed] Date 04 / 15 / 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

THE LOOSE GROUP

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		49236.91
(b) Cash on Hand at Beginning of Reporting Period.....	43005.07	
(c) Total Receipts (from Line 19)	10225.00	34850.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	53230.07	84086.91
7. Total Disbursements (from Line 31).....	5236.00	36092.84
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	47994.07	47994.07
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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
THE LOOSE GROUP

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10225.00	34850.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10225.00	34850.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10225.00	34850.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	10225.00	34850.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	10225.00	34850.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	236.00	1092.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	236.00	1092.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	35000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5236.00	36092.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5236.00	36092.84

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	10225.00	34850.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10225.00	34850.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	236.00	1092.84
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	236.00	1092.84

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
THE LOOSE GROUP

Full Name (Last, First, Middle Initial) A. Beaumont Allen, Sr.		Date of Receipt MM / DD / YYYY 07 / 22 / 2014 Transaction ID : SA11AI.5688
Mailing Address PO Box 20195		Amount of Each Receipt this Period 525.00
City Atlanta	State GA	Zip Code 30325
FEC ID number of contributing federal political committee. C	Name of Employer Self	
Occupation Occupation		Aggregate Year-to-Date ▼ 1575.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Niles Bolton		Date of Receipt MM / DD / YYYY 07 / 10 / 2014 Transaction ID : SA11AI.5690
Mailing Address 3060 Peachtree Street NW Suite 600		Amount of Each Receipt this Period 525.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. C	Name of Employer Niles Bolton & Associates	
Occupation Architect		Aggregate Year-to-Date ▼ 1575.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. John Carswell		Date of Receipt MM / DD / YYYY 07 / 22 / 2014 Transaction ID : SA11AI.5691
Mailing Address 26 East Bay Street		Amount of Each Receipt this Period 525.00
City Savannah	State GA	Zip Code 31401
FEC ID number of contributing federal political committee. C	Name of Employer Marsh USA	
Occupation Financial services		Aggregate Year-to-Date ▼ 1575.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	1575.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
THE LOOSE GROUP

Full Name (Last, First, Middle Initial)
A. Frederick E. Cooper

Mailing Address P. O. Box 52367

City Atlanta State GA Zip Code 30355

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

Name of Employer Cooper Capital LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1575.00

Date of Receipt
07 / 22 / 2014
Transaction ID : SA11AI.5692

Amount of Each Receipt this Period
525.00

Full Name (Last, First, Middle Initial)
B. Charles G. Crawley

Mailing Address 5996 Mitchell Road, N.W.

City Atlanta State GA Zip Code 30328

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
07 / 10 / 2014
Transaction ID : SA11AI.5693

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Julian LeCraw

Mailing Address 1575 Northside Drive

City Atlanta State GA Zip Code 30318

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

Name of Employer LeCraw Properties Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1575.00

Date of Receipt
07 / 10 / 2014
Transaction ID : SA11AI.5694

Amount of Each Receipt this Period
525.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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)
THE LOOSE GROUP

A. Ben Noble
Full Name (Last, First, Middle Initial)
Mailing Address P. O. Box 18769

City Atlanta	State GA	Zip Code 31126
-----------------	-------------	-------------------

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

Name of Employer The Noble Group	Occupation President
-------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2014

Transaction ID : SA11AI.5695

Amount of Each Receipt this Period
525.00

B. Ed Noble
Full Name (Last, First, Middle Initial)
Mailing Address P. O. Box 18651

City Atlanta	State GA	Zip Code 31126
-----------------	-------------	-------------------

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

Name of Employer Noble Properties, Inc.	Occupation President
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2014

Transaction ID : SA11AI.5696

Amount of Each Receipt this Period
525.00

C. Carter Pope
Full Name (Last, First, Middle Initial)
Mailing Address 3379 Peachtree Street

City Atlanta	State GA	Zip Code 30326
-----------------	-------------	-------------------

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

Name of Employer Self	Occupation Investor
--------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2014

Transaction ID : SA11AI.5697

Amount of Each Receipt this Period
525.00

SUBTOTAL of Receipts This Page (optional).....▶	1575.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
THE LOOSE GROUP

Full Name (Last, First, Middle Initial)
A. Mark Pope

Mailing Address 3379 Peachtree Street

City Atlanta State GA Zip Code 30326

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

Name of Employer Self Occupation Investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2014

Transaction ID : SA11AI.5698

Amount of Each Receipt this Period
525.00

Full Name (Last, First, Middle Initial)
B. Thomas Powell

Mailing Address 4700 Polo Lane

City Atlanta State GA Zip Code 30339

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

Name of Employer Troutman Sanders Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.5699

Amount of Each Receipt this Period
525.00

Full Name (Last, First, Middle Initial)
C. Robert J. Ratliff

Mailing Address 3810 Duckcove Way

City Cumming State GA Zip Code 30041

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11AI.5700

Amount of Each Receipt this Period
525.00

SUBTOTAL of Receipts This Page (optional).....▶	1575.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
THE LOOSE GROUP

Full Name (Last, First, Middle Initial)
A. Joe Rogers

Mailing Address P.O. Box 6450

City Norcross State GA Zip Code 30091

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

Name of Employer Waffle House Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2014

Transaction ID : SA11AI.5701

Amount of Each Receipt this Period
525.00

Full Name (Last, First, Middle Initial)
B. Gary W. Rollins

Mailing Address PO BOX 647

City Atlanta State GA Zip Code 30301

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

Name of Employer Rollins, Inc. Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11AI.5702

Amount of Each Receipt this Period
525.00

Full Name (Last, First, Middle Initial)
C. William Shearer

Mailing Address 1201 W. Peachtree St., N.W

City Atlanta State GA Zip Code 30309

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

Name of Employer Bryan Cave LLP Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11AI.5703

Amount of Each Receipt this Period
525.00

SUBTOTAL of Receipts This Page (optional).....▶	1575.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
THE LOOSE GROUP

Full Name (Last, First, Middle Initial) A. James Stephenson		Date of Receipt MM / DD / YYYY 07 / 10 / 2014 Transaction ID : SA11AI.5704
Mailing Address P.O. Box 43326		Amount of Each Receipt this Period 525.00
City Atlanta	State GA	Zip Code 30336
FEC ID number of contributing federal political committee. C	Name of Employer Yancey Bros.	Occupation President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1575.00	

Full Name (Last, First, Middle Initial) B. Frank Strickland		Date of Receipt MM / DD / YYYY 07 / 10 / 2014 Transaction ID : SA11AI.5706
Mailing Address 4592 Polo Lane		Amount of Each Receipt this Period 525.00
City Atlanta	State GA	Zip Code 30339
FEC ID number of contributing federal political committee. C	Name of Employer Independent	Occupation Investment Advisor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1575.00	

Full Name (Last, First, Middle Initial) C. Eric Tanenblatt		Date of Receipt MM / DD / YYYY 08 / 06 / 2014 Transaction ID : SA11AI.5707
Mailing Address 1000 FOXCROFT ROAD NW		Amount of Each Receipt this Period 525.00
City Atlanta	State GA	Zip Code 30327
FEC ID number of contributing federal political committee. C	Name of Employer McKenna Long & Aldridge	Occupation Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1575.00	

SUBTOTAL of Receipts This Page (optional).....▶	1575.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
THE LOOSE GROUP

Full Name (Last, First, Middle Initial)
A. William Towles

Mailing Address 4355 Cobb Parkway NE
Suite R

City Atlanta State GA Zip Code 30339

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

Name of Employer Wm. T. Towles Co. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1575.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 10 / 2014

Transaction ID : SA11AI.5709

Amount of Each Receipt this Period
525.00

Full Name (Last, First, Middle Initial)
B. John E. Whelchel

Mailing Address 377 Herrington Dr NE

City Atlanta State GA Zip Code 30342

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

Name of Employer Self Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1575.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11AI.5710

Amount of Each Receipt this Period
525.00

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

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) ▼

Aggregate Year-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).....▶	1050.00
TOTAL This Period (last page this line number only).....▶	10225.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
THE LOOSE GROUP

Full Name (Last, First, Middle Initial)

A. Holland & Knight LLP

Mailing Address 1201 West Peachtree Street
Suite 2000

City Atlanta State GA Zip Code 30309

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B.5682**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
THE LOOSE GROUP

Full Name (Last, First, Middle Initial)

A. MIKE COLLINS FOR CONGRESS

Mailing Address PO BOX 855

City JACKSON State GA Zip Code 30233

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: GA District: 10

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Runoff

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2014

Transaction ID : SB23.5715

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

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

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

5000.00

5000.00
