

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

BUDDY CARTER FOR CONGRESS

ADDRESS (number and street)

200 E ST JULIAN ST SUITE 603

Check if different
than previously
reported. (ACC)

SAVANNAH

GA

31401

2. FEC IDENTIFICATION NUMBER ▼

C

C00543967

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

GA

01

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)



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 / D D / Y Y Y Y
07 / 22 / 2014in the
State of

GA

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
05 / 01 / 2014

through

M M / D D / Y Y Y Y
07 / 02 / 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 CARLTON H HODGES

Signature of Treasurer

CARLTON H HODGES

[Electronically Filed]

Date

M M / D D / Y Y Y Y
07 / 28 / 2014

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)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 187

Write or Type Committee Name

BUDDY CARTER FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	4

	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))....	320568.32	841281.94
(b) Total Contribution Refunds (from Line 20(d))	1400.00	2150.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	319168.32	839131.94
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	380214.99	885670.66
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	380214.99	885670.66
8. Cash on Hand at Close of Reporting Period (from Line 27).....	230698.51	
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)	300000.00	

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

FEC Form 3 (Revised 12/2003)

PAGE 3 / 187

Write or Type Committee Name

BUDDY CARTER FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	4

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****(i) Itemized (use Schedule A).....**

218503.32

599864.94

(ii) Unitemized.....

12615.00

51919.00

(iii) TOTAL of contributions from individuals ▶

231118.32

651783.94

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

89450.00

189498.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

320568.32

841281.94

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

50000.00

300000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

50000.00

300000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

4293.25

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

370568.32

1145575.19

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 187

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	380214.99	885670.66
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	1400.00	1400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	750.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1400.00	2150.00
21. OTHER DISBURSEMENTS	0.00	27056.02
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	381614.99	914876.68

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	241745.18
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	370568.32
25. SUBTOTAL (add Line 23 and Line 24).....	612313.50
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	381614.99
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	230698.51

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 187

(check only one)

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

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)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BERTA ADAMS

Mailing Address 43 HERONS NEST

City

SAVANNAH

State

GA

Zip Code

31410-3331

FEC ID number of contributing federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 19 / 2014

Transaction ID : SA11AI.7626

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

JULIAN R. ADAMS

Mailing Address 2616 COUNTRY CLUB DR.

City

LYNN HAVEN

State

FL

Zip Code

32444

FEC ID number of contributing federal political committee.

C

Name of Employer

ADAMS PHARMACY

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 16 / 2014

Transaction ID : SA11AI.7629

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JULIAN R. ADAMS

Mailing Address 2616 COUNTRY CLUB DR.

City

LYNN HAVEN

State

FL

Zip Code

32444

FEC ID number of contributing federal political committee.

C

Name of Employer

ADAMS PHARMACY

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 02 / 2014

Transaction ID : SA11AI.8173

Amount of Each Receipt this Period

500.00

1100.00

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

TOTAL 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:

PAGE 6 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WALTRAUD ALLEN

A.

Mailing Address 5600 MIRAMAR LANE

City

COLLEYVILLE

State

TX

Zip Code

76034

FEC ID number of contributing
federal political committee.

C

Name of Employer

SUPER VALUE PHARMACY

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11Al.8176

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

EYAD ALSABBAGH

B.

Mailing Address 6330 REDWOOD CT

City

MASON

State

OH

Zip Code

45040

FEC ID number of contributing
federal political committee.

C

Name of Employer

BIOMED

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		21		2014

Transaction ID : SA11Al.7635

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JAMES ANDREWS

C.

Mailing Address 111 GREEN ISLAND ROAD

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

ANDREWS REALTY PARTNERSHIP

Occupation

BROKER

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2014

Transaction ID : SA11Al.7637

Amount of Each Receipt this Period

500.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

TOMMY ARMES**A.**

Mailing Address 164 CHANNING LANE

City

CROSSVILLE

State

TN

Zip Code

38555

FEC ID number of contributing
federal political committee.

C

Name of Employer

CUMBERLAND VITAL CARE

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SA11AI.7638

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

LISA ASHWORTH**B.**

Mailing Address 708 BENT TREE CT.

City

COPPELL

State

TX

Zip Code

75019

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHILDREN'S MED CTR

Occupation

PHARMACIST

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.7855

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MARK AURIT**C.**

Mailing Address 4220 47TH STREET, NE

City

BISMARK

State

ND

Zip Code

58503

FEC ID number of contributing
federal political committee.

C

Name of Employer

HEALTH MART PHARMACIES

Occupation

OWNER

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8187

Amount of Each Receipt this Period

1000.00

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:

PAGE 8 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MAZEN BAISA

Mailing Address 45236 MIDDLEBURY LANE

City

CANTON

State

MI

Zip Code

48188

FEC ID number of contributing federal political committee.

C

Name of Employer

BIOMED HEALTH SOLUTIONS

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	1			2	0	1	4		

Transaction ID : SA11Al.7644

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JASON BARNETT

Mailing Address 2380 PROSPECT RD

City

NAUVOO

State

AL

Zip Code

35578

FEC ID number of contributing federal political committee.

C

Name of Employer

PROFESSIONAL PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	1			2	0	1	4		

Transaction ID : SA11Al.7648

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JOHN RICHARD BARROW

Mailing Address 301 BUTLER AVENUE

City

TYBEE ISLAND

State

GA

Zip Code

31328-9737

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	4		

Transaction ID : SA11Al.7428

Amount of Each Receipt this Period

1000.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JAMES W. BARTLING

Mailing Address 1136 BELLEWOOD SQUARE

City

DUNWOODY

State

GA

Zip Code

30338

FEC ID number of contributing federal political committee.

C

Name of Employer
MERCER UNIVERSITYOccupation
PHARMACIST

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 01 / 2014

Transaction ID : SA11AI.8189

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

WILLIAM BARTON Jr.

Mailing Address 25 TIDEWATER WAY

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing federal political committee.

C

Name of Employer
WELLS FARGO ADVISORSOccupation
FINANCIAL ADVISOR

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11AI.7654

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

LARRY BATTEN

Mailing Address 2001 PIONEER ST.

City

WAYCROSS

State

GA

Zip Code

31501

FEC ID number of contributing federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
PHARMACIST

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : SA11AI.8190

Amount of Each Receipt this Period

500.00

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

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

1750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOHN A. BEASLEY**A.**

Mailing Address 7 BRANSBY DR.

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing
federal political committee.

C

Name of Employer

CLASSIC CRAFT DENTAL LAB

Occupation

OWNER

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8191

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JACOB BECKEL**B.**

Mailing Address 5710 HOOVER BLVD

City

TAMPA

State

FL

Zip Code

33634

FEC ID number of contributing
federal political committee.

C

Name of Employer

ANAZAO HEALTH

Occupation

CEO

Receipt For: 2014

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7521

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JERRY BEETS**C.**

Mailing Address 17 WATERSIDE RD

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.7658

Amount of Each Receipt this Period

100.00

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:

PAGE 11 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

GUS H. BELL

Mailing Address P.O. BOX 14247

City

SAVANNAH

State

GA

Zip Code

31416

FEC ID number of contributing federal political committee.

C

Name of Employer

HGBD, INC.

Occupation

ENGINEER

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1750.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11AI.7659

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

FREDERICK S BERGEN

Mailing Address 123 EAST CHARLTON STREET

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing federal political committee.

C

Name of Employer

BERGEN & BERGEN

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 25 / 2014

Transaction ID : SA11AI.8195

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

STEPHEN BERNARDI

Mailing Address 250 GROVE ST.

City

FRAMINGHAM

State

MA

Zip Code

01701

FEC ID number of contributing federal political committee.

C

Name of Employer

JOHNSON COMPOUNDING & WELLNESS

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11AI.7660

Amount of Each Receipt this Period

500.00

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:

PAGE 12 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BARRY BILBRO

A.

Mailing Address 114 MILL POND PLANTATION WAY

City

WARNER ROBINS

State

GA

Zip Code

31088

FEC ID number of contributing
federal political committee.

C

Name of Employer
MEDICINE SHOPPEOccupation
PHARMACIST

Receipt For: 2014

☐ Primary
☒ Other (specify)

General

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7662

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

SHELDON BIRCH

B.

Mailing Address 4776 AUTUMN CV

City

ERDA

State

UT

Zip Code

84074

FEC ID number of contributing
federal political committee.

C

Name of Employer
BIRCH FAMILY PHARMACYOccupation
OWNER/PHARMACIST

Receipt For: 2014

☐ Primary
☒ Other (specify)

General

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		14		2014

Transaction ID : SA11AI.8519

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MICHAEL BLAIRE

C.

Mailing Address 10921 N 140 WAT

City

SCOTTSDALE

State

AZ

Zip Code

85259

FEC ID number of contributing
federal political committee.

C

Name of Employer
DIAMOND BACK DRUGSOccupation
PHARMACIST

Receipt For: 2014

☒ Primary
☐ Other (specify)

General

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7529

Amount of Each Receipt this Period

1000.00

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:

PAGE 13 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WILLIAM P BLAND Jr.

A.

Mailing Address 111 SCHOONER DRIVE

City

SAVANNAH

State

GA

Zip Code

31410

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2014

Transaction ID : SA11AI.7664

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

BILL BLOODWORTH

B.

Mailing Address 904 AUTUMN RD, STE 275

City

LITTLE ROCK

State

AR

Zip Code

72211

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2014

Transaction ID : SA11AI.8200

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JOHN BOFF

C.

Mailing Address 99 BOONE TRAIL

City

WEAVERVILLE

State

NC

Zip Code

28787

FEC ID number of contributing
federal political committee.

C

Name of Employer

ASHEVILLE COMPOUNDING PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2014

Transaction ID : SA11AI.7665

Amount of Each Receipt this Period

500.00

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 14 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ELLEN L. BOLCH

A.

Mailing Address 3 WEST PERRY STREET

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing federal political committee.

C

Name of Employer
THA GROUP

Occupation

PRESIDENT/CEO

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

Transaction ID : SA11AI.7666

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

RANDALL BOOKER

B.

Mailing Address P.O. BOX 73

City

SAVANNAH

State

GA

Zip Code

31402

FEC ID number of contributing federal political committee.

C

Name of Employer
TICO

Occupation

CHAIRMAN, CEO

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8202

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

KEVIN BORG

C.

Mailing Address 21753 N 77TH AVE. #1100

City

PEORIA

State

AZ

Zip Code

85382

FEC ID number of contributing federal political committee.

C

Name of Employer
POTTER'S HOUSE APOTHECARY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7669

Amount of Each Receipt this Period

250.00

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 15 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

KIM BOST

A.

Mailing Address 1228 HISTORIC HOMER WAY

City

HOMER

State

GA

Zip Code

30547

FEC ID number of contributing federal political committee.

C

Name of Employer

HOMER DRUG COMPANY

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11Al.7671

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

CATHERINE M BOWMAN

B.

Mailing Address 7505 WATERS AVENUE
STE D-3

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing federal political committee.

C

Name of Employer

THE BOWMAN LAW OFFICE, LLC

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 05 / 2014

Transaction ID : SA11Al.7682

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

DANIEL H. BRADLEY

C.

Mailing Address P.O. BOX 1408

City

SAVANNAH

State

GA

Zip Code

31402

FEC ID number of contributing federal political committee.

C

Name of Employer

DIXIE PLYWOOD CO

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 19 / 2014

Transaction ID : SA11Al.7683

Amount of Each Receipt this Period

1000.00

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 16 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROBERT BRENSEL

A.

Mailing Address 18 ROYAL GLEN CT

City

WALNUT CREEK

State

CA

Zip Code

94595

FEC ID number of contributing
federal political committee.

C

Name of Employer
SCRIPTWORKSOccupation
PHARMACIST, PRES.

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7688

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

BILL BREWSTER

B.

Mailing Address P.O. BOX 368

City

MARIETTA

State

OK

Zip Code

73448

FEC ID number of contributing
federal political committee.

C

Name of Employer
TEXAS TROPHY CLUB RANCH, LPOccupation
OWNER

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Transaction ID : SA11AI.7692

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

MERRILL BRINTON

C.

Mailing Address 27464 TIERRA VERDE

City

HEMET

State

CA

Zip Code

92544

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
PHARMACIST/AAP MEMBER

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		05		2014

Transaction ID : SA11AI.7423

Amount of Each Receipt this Period

2600.00

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

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

3150.00

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

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

FOR LINE NUMBER:

PAGE 17 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BRUCE BROADRICK

A.

Mailing Address P.O. BOX 947

City

DALTON

State

GA

Zip Code

30722

FEC ID number of contributing
federal political committee.

C

Name of Employer
WALGREENSOccupation
PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8205

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

LAWRENCE A BRODY

B.

Mailing Address 403 WHEELER STREET

City

SAVANNAH

State

GA

Zip Code

31405

FEC ID number of contributing
federal political committee.

C

Name of Employer
WELLS FARGOOccupation
FINANCIAL ADVISOR

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2014

Transaction ID : SA11AI.7695

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

DARBY BROWN

C.

Mailing Address 11753 DANRICH RD

City

PARKER

State

CO

Zip Code

80138

FEC ID number of contributing
federal political committee.

C

Name of Employer
BROWN'S COMPOUNDING CENTEROccupation
PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7698

Amount of Each Receipt this Period

500.00

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:

PAGE 18 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BARRY BRYANT

A.

Mailing Address 438 FRONT ST.

City

NORTH AUGUSTA

State

SC

Zip Code

29841

FEC ID number of contributing
federal political committee.

C

Name of Employer

BARNEYS PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	1	4

Transaction ID : SA11AI.8513

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

FRANKLIN BURCH

B.

Mailing Address 3163 NINE RUN RD.

City

SCREVEN

State

GA

Zip Code

31560

FEC ID number of contributing
federal political committee.

C

Name of Employer

BURCH FARM

Occupation

FARMER

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	4

Transaction ID : SA11AI.8210

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JENNIFER BURCH

C.

Mailing Address 5815 JOMALI DR.

City

DURHAM

State

NC

Zip Code

27705

FEC ID number of contributing
federal political committee.

C

Name of Employer

CENTRAL COMPOUNDING CENTER

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	1	4

Transaction ID : SA11AI.7707

Amount of Each Receipt this Period

250.00

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:

PAGE 19 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

RICHARD BURRELL

A.

Mailing Address 981 GUYS CT., SW

City

LILBURN

State

GA

Zip Code

30047

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF

Occupation

RETIRED

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2014

Transaction ID : SA11AI.8212

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

CHRISTEN CANNADY

B.

Mailing Address 12300 APACHE AVE., UNIT 211

City

SAVANNAH

State

GA

Zip Code

31419

FEC ID number of contributing federal political committee.

C

Name of Employer

MEMORIAL UNIV MEDICAL CENTER

Occupation

RN

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2014

Transaction ID : SA11AI.8214

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

STEVIE CANNADY

C.

Mailing Address 240 SPANTON CRESCENT

City

POOLER

State

GA

Zip Code

31322

FEC ID number of contributing federal political committee.

C

Name of Employer

RSC LOGISTICS LLC

Occupation

PRESIDENT

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

5100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2014

Transaction ID : SA11AI.7711

Amount of Each Receipt this Period

2500.00

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

3800.00

TOTAL 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:

PAGE 20 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

GENE CARTLEDGE

A.

Mailing Address 27 SEAWATCH DR.

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing federal political committee.

C

Name of Employer

UNION CAMP

Occupation

CEO, RETIRED

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 02 / 2014

Transaction ID : SA11AI.8216

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

RAYMOND E CARTLEDGE

B.

Mailing Address 27 SEAWATCH DRIVE

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 19 / 2014

Transaction ID : SA11AI.7718

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

R.H. CASTELLINI

C.

Mailing Address 312 ELM ST., STE 2600

City

CINCINNATI

State

OH

Zip Code

45202

FEC ID number of contributing federal political committee.

C

Name of Employer

CASTELLINI MANAGEMENT CO.

Occupation

CEO

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 25 / 2014

Transaction ID : SA11AI.8218

Amount of Each Receipt this Period

1000.00

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 21 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

SCOTT CENTER

A.

Mailing Address 120 EAST 42ND STREET

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing federal political committee.

C

Name of Employer

NATIONAL OFFICE SYSTEMS

Occupation

OWNER

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2014

Transaction ID : SA11AI.7719

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

BARRY CHRISTENSEN

B.

Mailing Address 3409 BAILEY BLVD.

City

KETCHIKAN

State

AR

Zip Code

99901

FEC ID number of contributing federal political committee.

C

Name of Employer

ISLAND PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8220

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

PAUL R CLEVELAND II

C.

Mailing Address 841 RADICK DRIVE

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHYSICAL THERAPIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

375.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2014

Transaction ID : SA11AI.8222

Amount of Each Receipt this Period

125.00

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

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

875.00

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

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

FOR LINE NUMBER:

PAGE 22 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

DALE M. COKER

Mailing Address 207 ALLISON DRIVE

City

WOODSTOCK

State

GA

Zip Code

30188

FEC ID number of contributing federal political committee.

C

Name of Employer

CHEROKEE CUSTOM SCRIPT PHARMAC

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7725

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

DALE M. COKER

Mailing Address 207 ALLISON DRIVE

City

WOODSTOCK

State

GA

Zip Code

30188

FEC ID number of contributing federal political committee.

C

Name of Employer

CHEROKEE CUSTOM SCRIPT PHARMAC

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8223

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ALLISON COLE

Mailing Address 337 COMMERCIAL DR.
STE 500

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing federal political committee.

C

Name of Employer

COLE, FLEMING & CLARK, PC

Occupation

ATTORNEY

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		05		2014

Transaction ID : SA11AI.7726

Amount of Each Receipt this Period

1000.00

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

2000.00

TOTAL 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:

PAGE 23 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

TERRY COLEMAN

A.

Mailing Address 1401 WOODSIDE RIDGE

City

SAVANNAH

State

GA

Zip Code

31405

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

SURVEYOR

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2014

Transaction ID : SA11AI.7728

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MICHAEL COLLINS

B.

Mailing Address 5409 CLYDESDALE LANE

City

SAGINAW

State

MO

Zip Code

48603

FEC ID number of contributing
federal political committee.

C

Name of Employer

HEALTHWAY COMPOUNDING PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7729

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

CHARLES B COMPTON

C.

Mailing Address 55 MCINTOSH DRIVE

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing
federal political committee.

C

Name of Employer

SEACREST PARTNERS

Occupation

INSURANCE AGENT

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2014

Transaction ID : SA11AI.7731

Amount of Each Receipt this Period

250.00

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:

PAGE 24 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOHN M CONSIDINE Jr.

A.

Mailing Address 3 MODENA ISLAND DRIVE

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer
COASTAL IMAGINGOccupation
PHYSICIAN

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11AI.7732

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

PAT COOPER

B.

Mailing Address 107 SOUTHPOINT DR.

City

ST. SIMONS ISLAND

State

GA

Zip Code

31522

FEC ID number of contributing
federal political committee.

C

Name of Employer
HODNETT COOPER VACATION RENTALOccupation
OWNER

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 02 / 2014

Transaction ID : SA11AI.8224

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JON DAVID COPELAND

C.

Mailing Address 354 COTTON STREET

City

SCOTTSBORO

State

AL

Zip Code

35769

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN ASSOCIATED PHARMACIESOccupation
CEO/PHARMACIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11AI.7425

Amount of Each Receipt this Period

2600.00

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 25 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WALTER CORISH Jr.

Mailing Address P.O. BOX 14518

City

SAVANNAH

State

GA

Zip Code

31416

FEC ID number of contributing federal political committee.

C

Name of Employer
CORISH & COMPANYOccupation
PRESIDENT

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 24 / 2014

Transaction ID : SA11AI.8226

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

KEN COUCH

Mailing Address PO BOX 800

City

WHITE STONE

State

SC

Zip Code

29386

FEC ID number of contributing federal political committee.

C

Name of Employer
SMITH DRUG COMPANYOccupation
PRESIDENT/PHARMACIST

Receipt For: 2014

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11AI.7438

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

KEN COUCH

Mailing Address PO BOX 800

City

WHITE STONE

State

SC

Zip Code

29386

FEC ID number of contributing federal political committee.

C

Name of Employer
SMITH DRUG COMPANYOccupation
PRESIDENT/PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 02 / 2014

Transaction ID : SA11AI.8230

Amount of Each Receipt this Period

1000.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ANNIE CRAFT

A.

Mailing Address P.O. BOX 126

City

PLAIN CITY

State

OH

Zip Code

43064

FEC ID number of contributing federal political committee.

C

Name of Employer

PLAIN CITY DRUGGIST

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		25		2014

Transaction ID : SA11AI.8231

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

BEN CRAVEY

B.

Mailing Address 115 COMMERCE STREET

City

HAWKINSVILLE

State

GA

Zip Code

31036

FEC ID number of contributing federal political committee.

C

Name of Employer

BATTS DRUG CO

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

Transaction ID : SA11AI.7737

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

DAVID CREECY

C.

Mailing Address 498 WYTHE CREEK ROAD

City

POQUOSON

State

VA

Zip Code

23662

FEC ID number of contributing federal political committee.

C

Name of Employer

YORK DRUG INC

Occupation

PHARMACIST

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		12		2014

Transaction ID : SA11AI.7738

Amount of Each Receipt this Period

250.00

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

1250.00

TOTAL 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:

PAGE 27 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAVID CREECY

A.

Mailing Address 498 WYTHE CREEK ROAD

City

POQUOSON

State

VA

Zip Code

23662

FEC ID number of contributing federal political committee.

C

Name of Employer

YORK DRUG INC

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2014

Transaction ID : SA11AI.8233

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

RICKARD L CULBRETH

B.

Mailing Address 8 HUNTINGWOOD RETREAT

City

SAVANNAH

State

GA

Zip Code

31411-2828

FEC ID number of contributing federal political committee.

C

Name of Employer

CULBRETH FAMILY LP

Occupation

GENERAL PARTNER

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2014

Transaction ID : SA11AI.7739

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

KIM CURL

C.

Mailing Address 621 WEST MEMORIAL DR.

City

DALLAS

State

GA

Zip Code

30101

FEC ID number of contributing federal political committee.

C

Name of Employer

C & C PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.7742

Amount of Each Receipt this Period

250.00

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

1000.00

TOTAL 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:

PAGE 28 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

KEVIN F CURTIN

A.

Mailing Address 423 GEORGIA AVE SE

City

ATLANTA

State

GA

Zip Code

30312

FEC ID number of contributing federal political committee.

C

Name of Employer

AT&T

Occupation

REGIONAL VP

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		06		2014

Transaction ID : SA11Al.7744

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

KEVIN F CURTIN

B.

Mailing Address 423 GEORGIA AVE SE

City

ATLANTA

State

GA

Zip Code

30312

FEC ID number of contributing federal political committee.

C

Name of Employer

AT&T

Occupation

REGIONAL VP

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

850.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		09		2014

Transaction ID : SA11Al.7745

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

WILLIAM DANIEL Jr.

C.

Mailing Address 22 MULBERRY BLUFF DRIVE

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing federal political committee.

C

Name of Employer

VADEN AUTOMOTIVE GROUP

Occupation

VP & GENERAL COUNSEL

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2014

Transaction ID : SA11Al.7746

Amount of Each Receipt this Period

1000.00

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

1350.00

TOTAL 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:

PAGE 29 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOE DAUGHERTY**A.**

Mailing Address 1365 SPUR DR.

City

MARSHFIELD

State

MO

Zip Code

65706

FEC ID number of contributing
federal political committee.

C

Name of Employer

STANLEY'S PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8237

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JOHN DAVALT**B.**

Mailing Address 1439 LEGACY CIRCLE

City

FENTON

State

MO

Zip Code

63026

FEC ID number of contributing
federal political committee.

C

Name of Employer

PHARMACY SERVICES

Occupation

PHARMACIST

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7749

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MAHLON DAVIDSON**C.**

Mailing Address 5002 LOWER JERSEY ROAD

City

OXFORD

State

GA

Zip Code

30054

FEC ID number of contributing
federal political committee.

C

Name of Employer

KROGER PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8240

Amount of Each Receipt this Period

250.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ARCHIE DAVIS

Mailing Address 244 EAST OGLETHORPE AVENUE

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2014

Transaction ID : SA11AI.7751

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MARK F DEHLER

Mailing Address P.O. BOX 409

City

YOUNG HARRIS

State

GA

Zip Code

30582

FEC ID number of contributing federal political committee.

C

Name of Employer

MARK DEHLER LLC

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2014

Transaction ID : SA11AI.7752

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

DAVID DICKEY

Mailing Address 4 SPRINGFIELD PLACE

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing federal political committee.

C

Name of Employer

OLIVER MANNER LLP

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8241

Amount of Each Receipt this Period

250.00

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:

PAGE 31 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

TJ DILDINE

Mailing Address 601 N CONGRESS AVE. #407

City

DELRAY BEACH

State

FL

Zip Code

33445

FEC ID number of contributing
federal political committee.
 C

Name of Employer

DELRAY SHORES PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	1	4

Transaction ID : SA11AI.7753

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

FERRELL A DIXON Jr.

Mailing Address 222 JERICO WAY

City

RICHMOND HILL

State

GA

Zip Code

31324

FEC ID number of contributing
federal political committee.
 C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : SA11AI.7755

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

GEORGE DOHERTY

Mailing Address 104 HOMER DR.

City

LAKE LUZERNE

State

NY

Zip Code

12846

FEC ID number of contributing
federal political committee.
 C

Name of Employer

FALLON WELLNESS PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	1	4

Transaction ID : SA11AI.7756

Amount of Each Receipt this Period

500.00

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

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

1150.00

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

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

FOR LINE NUMBER:

PAGE 32 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

LARRY DOUD

Mailing Address 18 MELBOURNE GREEN

City

FAIRPORT

State

NY

Zip Code

14450

FEC ID number of contributing federal political committee.

C

Name of Employer

RDC

Occupation

CEO

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		21		2014

Transaction ID : SA11AI.7758

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

SHANNON DOUTHIT

Mailing Address 2408 MEADOWBROOK RD. SE

City

DECATUR

State

AL

Zip Code

35601

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST, NCPA MEMB

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2014

Transaction ID : SA11AI.7760

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

J. ASHLEY DUKES

Mailing Address 104 STRACHAN LANE

City

ST. SIMON'S ISLAND

State

GA

Zip Code

31522

FEC ID number of contributing federal political committee.

C

Name of Employer

DUKES DRUGS INC.

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2014

Transaction ID : SA11AI.7762

Amount of Each Receipt this Period

250.00

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

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

2750.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

REED DULANY III

A.

Mailing Address 4 W. TAYLOR ST.

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing
federal political committee.

C

Name of Employer

DULANY IND.

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

4600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		13		2014

Transaction ID : SA11AI.7763

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

REED DULANY III

B.

Mailing Address 4 W. TAYLOR ST.

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing
federal political committee.

C

Name of Employer

DULANY IND.

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

5600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8243

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

ANTONY EASON

C.

Mailing Address 151 ROSE DR.

City

LAWNDALE

State

NC

Zip Code

28090

FEC ID number of contributing
federal political committee.

C

Name of Employer

TAS DRUG

Occupation

PHARMACIST, AAP MEMB

Receipt For: 2014

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		05		2014

Transaction ID : SA11AI.7766

Amount of Each Receipt this Period

500.00

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

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

4100.00

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

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

FOR LINE NUMBER:

PAGE 34 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

THOMAS EASON

A.

Mailing Address 787 TOWER RD

City

VALE

State

NC

Zip Code

28168

FEC ID number of contributing
federal political committee.

C

Name of Employer
TAS DRUGSOccupation
PHARMACIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11AI.7768

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

RICHARD D ECKBURG

B.

Mailing Address 48 COTTON CROSSING WEST

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

3600.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 10 / 2014

Transaction ID : SA11AI.8244

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

CINDY EDWARDS

C.

Mailing Address 5 PRESCOTT LN

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
FREELANCE WRITER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 02 / 2014

Transaction ID : SA11AI.8245

Amount of Each Receipt this Period

100.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 187

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

EDGAR EDWARDS**A.**

Mailing Address 504 MARTIN ROAD

City

HINESVILLE

State

GA

Zip Code

31313

FEC ID number of contributing
federal political committee.

C

Name of Employer

BUCKLEY ARCHITECTURAL SERVICES

Occupation

ADMINISTRATOR

Receipt For: 2014

☐ Primary
☒ Other (specify)

General

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8246

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

ROBERT A ELLIS Jr.**B.**

Mailing Address 547 EAST ST. JULIAN STREET

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFLAC

Occupation

DEVELOPMENT EXECUTIVE

Receipt For: 2014

☐ Primary
☒ Other (specify)

General

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		13		2014

Transaction ID : SA11AI.7772

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

SCOTT ELWOOD**C.**

Mailing Address 210 ORCHARD LANE

City

GLASSBORO

State

NJ

Zip Code

08028

FEC ID number of contributing
federal political committee.

C

Name of Employer

WEDGEWOOD PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary
☐ Other (specify)

General

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7775

Amount of Each Receipt this Period

250.00

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

600.00

TOTAL 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: PAGE 36 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MELISSA EMERY

A.

Mailing Address 43 COTTON XING W

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

MANAGEMENT CONSULTANT

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

450.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 25 / 2014

Transaction ID : SA11Al.8248

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

JOSEPH ENTREKIN

B.

Mailing Address 501 VALLEY RUN DR.

City

BREMEN

State

GA

Zip Code

30110

FEC ID number of contributing
federal political committee.

C

Name of Employer

GARRETT DRUG CO.

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 29 / 2014

Transaction ID : SA11Al.7777

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

CLIFFORD ESOMONU

C.

Mailing Address 2693 FRUITVALE AVE.

City

OAKLAND

State

CA

Zip Code

94601

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRUITVALE AVE. PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 11 / 2014

Transaction ID : SA11Al.7779

Amount of Each Receipt this Period

500.00

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

1200.00

TOTAL 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:

PAGE 37 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JAMES ETTARE

A.

Mailing Address 194 N LAKE DR.

City

LYNCHBURG

State

VA

Zip Code

24502

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

500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11AI.7782

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ERIC EVERETT

B.

Mailing Address 5453 W 61ST PLACE

City

MISSION

State

KS

Zip Code

66205

FEC ID number of contributing federal political committee.

C

Name of Employer

OBRIEN PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 19 / 2014

Transaction ID : SA11AI.7506

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

SPRAGUE EXLEY

C.

Mailing Address 703 BRADLEY POINT RD.

City

SAVANNAH

State

GA

Zip Code

31410

FEC ID number of contributing federal political committee.

C

Name of Employer

EXLEY MANAGEMENT SERVICES

Occupation

AGENT

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 23 / 2014

Transaction ID : SA11AI.7786

Amount of Each Receipt this Period

250.00

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

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

1750.00

FOR LINE NUMBER:		PAGE 38 OF 187	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

NAME OF COMMITTEE (In Full)
BUDDY CARTER FOR CONGRESS

MM / DD / YYYY
06 / 20 / 2014

C

500.00

06 / 30 / 2014

C

250.00

05 / 14 / 2014

C

Age Group	Percentage
18-24	~45.00
25-34	~35.00
35-44	~25.00
45-54	~15.00
55-64	~10.00
65-74	~5.00
75-84	~2.00
85+	~1.00

300.00

850.00

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

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

FOR LINE NUMBER:

PAGE 39 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOSEPH FINNY

A.

Mailing Address 9000 RIVERVIEW PARK DR.

City

RALEIGH

State

NC

Zip Code

27613

FEC ID number of contributing federal political committee.

C

Name of Employer

MAIN ST. PHARMACY LLC

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2014

Transaction ID : SA11AI.8250

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

RALPH FORBES

B.

Mailing Address 911 C SCAPE DRIVE

City

RICHMOND HILL

State

GA

Zip Code

31324

FEC ID number of contributing federal political committee.

C

Name of Employer

THOMAS & HUTTON

Occupation

ENGINEER

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2014

Transaction ID : SA11AI.8251

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

KENT FOUNTAIN

C.

Mailing Address 410 SHARPE ST

City

SCREVEN

State

GA

Zip Code

31560

FEC ID number of contributing federal political committee.

C

Name of Employer

SOUTHEASTERN GIN & PEANUT

Occupation

PRES. / CEO

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

Transaction ID : SA11AI.8252

Amount of Each Receipt this Period

1000.00

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:

PAGE 40 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

HAROLD FOWLER

A.

Mailing Address 115 STERLING WOODS DR. S

City

RICHMOND HILL

State

GA

Zip Code

31324

FEC ID number of contributing federal political committee.

C

Name of Employer

CITY OF RICHMOND HILL

Occupation

MAYOR

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		30		2014

Transaction ID : SA11AI.7793

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

GLENN FOX

B.

Mailing Address 699 STARR CREEK RD.

City

RICHMOND HILL

State

GA

Zip Code

31324

FEC ID number of contributing federal political committee.

C

Name of Employer

COASTAL DISCOUNT PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2014

Transaction ID : SA11AI.7794

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

ANDY FREEMAN

C.

Mailing Address 4501 PLANTER HILL DR.

City

POWDER SPRINGS

State

GA

Zip Code

30127

FEC ID number of contributing federal political committee.

C

Name of Employer

GA PHARMACY ASSOC.

Occupation

PHARMACIST-DIRECTOR

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		21		2014

Transaction ID : SA11AI.7795

Amount of Each Receipt this Period

250.00

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:

PAGE 41 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MARK FREITAS

Mailing Address 134 OXFORD RD

City

CHESTER

State

NY

Zip Code

10918

FEC ID number of contributing federal political committee.

C

Name of Employer

WASHINGTONVILLE PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 06 / 2014

Transaction ID : SA11AI.7796

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

DAVID J GASKIN

Mailing Address 102 HICKORY GROVE LANE

City

SAVANNAH

State

GA

Zip Code

31405-1031

FEC ID number of contributing federal political committee.

C

Name of Employer

OPTIM MEDICAL ASSOCIATES

Occupation

PHYSICIAN

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 20 / 2014

Transaction ID : SA11AI.7798

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JOHN GEORGE

Mailing Address 311 MCALPIN DRIVE

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing federal political committee.

C

Name of Employer

OPTIM HEALTHCARE

Occupation

PHYSICIAN

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

3600.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.8256

Amount of Each Receipt this Period

1000.00

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:

PAGE 42 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

KENNETH GIAQUINTO

A.

Mailing Address 19 COUNTRY CLUB RD

City

EASTCHESTER

State

NY

Zip Code

10709

FEC ID number of contributing
federal political committee.

C

Name of Employer

RYE BEACH PHARMACY

Occupation

MANAGER

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	6			2	0	1	4		

Transaction ID : SA11AI.7801

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MATT GIGNILLIAT

B.

Mailing Address 19 WOODLAND CREEK ROAD

City

SAVANNAH

State

GA

Zip Code

31405

FEC ID number of contributing
federal political committee.

C

Name of Employer

GEORGIA POWER

Occupation

MANAGER

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	9			2	0	1	4		

Transaction ID : SA11AI.7805

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MAGGIE GILL

C.

Mailing Address 112 MODENA ISLAND DRIVE

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

MEMORIAL HEALTH

Occupation

CEO

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

700.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	4		

Transaction ID : SA11AI.8259

Amount of Each Receipt this Period

350.00

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

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

1100.00

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 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

STEPHEN GIROUX

A.

Mailing Address 9034 RIDGE ROAD

City

GASPORT

State

NY

Zip Code

14067

FEC ID number of contributing federal political committee.

C

Name of Employer

MIDDLEPORT FAMILY HEALTH CTR

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2014

Transaction ID : SA11Al.7806

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

EDDIE GLOVER

B.

Mailing Address 4220 BAYHILL

City

CONWAY

State

AZ

Zip Code

72034

FEC ID number of contributing federal political committee.

C

Name of Employer

US COMPOUNDING PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2014

Transaction ID : SA11Al.7807

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JOHN GOODRUM

C.

Mailing Address 40 HOSPITAL RD

City

NEWNAN

State

GA

Zip Code

30263

FEC ID number of contributing federal political committee.

C

Name of Employer

LEE GOODRUM PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2014

Transaction ID : SA11Al.7809

Amount of Each Receipt this Period

500.00

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:

PAGE 44 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

LEIGH ANN GRASSO**A.**

Mailing Address 30918 KEENELAND DR

City

FAIR OAKS RANCH

State

TX

Zip Code

78015

FEC ID number of contributing
federal political committee.

C

Name of Employer

ANNIE'S APOTHECARY

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7811

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

THOMAS S GRAY Jr.**B.**

Mailing Address P.O. BOX 8050

City

SAVANNAH

State

GA

Zip Code

31412

FEC ID number of contributing
federal political committee.

C

Name of Employer

GRAY PANNELL & WOODWARD

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2014

Transaction ID : SA11AI.7857

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

STEPHEN GREEN**C.**

Mailing Address P.O. BOX 10143

City

SAVANNAH

State

GA

Zip Code

31412

FEC ID number of contributing
federal political committee.

C

Name of Employer

STEPHEN GREEN PROPERTIES

Occupation

PRES./ CEO

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8262

Amount of Each Receipt this Period

2600.00

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

4100.00

TOTAL 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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

THOMAS GREEN

A.

Mailing Address 138 CARDINAL RD.

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2014

Transaction ID : SA11AI.7858

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ROBERT GREENWOOD

B.

Mailing Address 3553 MUIRFIELD DRIVE

City

WATERLOO

State

IA

Zip Code

50701

FEC ID number of contributing
federal political committee.

C

Name of Employer

GREENWOODY DRUG INC.

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

850.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2014

Transaction ID : SA11AI.8264

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

FRED GRICE Jr.

C.

Mailing Address 3001 WEST M-20

City

NEW ERA

State

MS

Zip Code

49446

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOME TOWN PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2014

Transaction ID : SA11AI.8265

Amount of Each Receipt this Period

500.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

KERRY GRIFFIN

A.

Mailing Address 30 HICKORY TRACE CT.

City

CARROLLTON

State

GA

Zip Code

30116

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRANKLIN PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		09		2014

Transaction ID : SA11AI.7859

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

RICHARD GRIFFIS

B.

Mailing Address 110 COMANCHE ROAD

City

BRUNSWICK

State

GA

Zip Code

31525

FEC ID number of contributing
federal political committee.

C

Name of Employer

RAINBOW DRUG STORE

Occupation

OWNER

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8267

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

NICHOLAS GROOVER

C.

Mailing Address 112 PALMETTO DR.

City

SAVANNAH

State

GA

Zip Code

31410

FEC ID number of contributing
federal political committee.

C

Name of Employer

SAV. PILOTS ASSOC.

Occupation

PRESIDENT

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

Transaction ID : SA11AI.7863

Amount of Each Receipt this Period

100.00

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

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

700.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

EZRA GRUSZYNSKI

A.

Mailing Address W 6332 CIRCLE DR.

City

CRIVITZ

State

WI

Zip Code

54114

FEC ID number of contributing
federal political committee.

C

Name of Employer
CRIVITZ PHARMACYOccupation
PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11AI.7864

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

SARAH J. HALL

B.

Mailing Address 17 BARTOW POINTE DRIVE

City

SAVANNAH

State

GA

Zip Code

31404

FEC ID number of contributing
federal political committee.

C

Name of Employer
LANDMARK 24Occupation
BUILDER/DEVELOPER

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2014

Transaction ID : SA11AI.7868

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

J. PAUL HANSEN

C.

Mailing Address 24 DRAYTON STREET
9TH FLOOR

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing
federal political committee.

C

Name of Employer
HANSEN ARCHITECTSOccupation
ARCHITECT

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2014

Transaction ID : SA11AI.8270

Amount of Each Receipt this Period

500.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

PHYLLIS HARDEMAN

A.

Mailing Address 120 BONAVENTURE RD.

City

THUNDERBOLT

State

GA

Zip Code

31404

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2014

Transaction ID : SA11Al.7873

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

JOSEPH HARMISON

B.

Mailing Address P.O. BOX 152643

City

ARLINGTON

State

TX

Zip Code

76015

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2014

Transaction ID : SA11Al.7874

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

WINTON HARRIS

C.

Mailing Address 493 CANA OF GALILEE

City

TUCKER

State

GA

Zip Code

30084

FEC ID number of contributing
federal political committee.

C

Name of Employer

CVS PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11Al.7875

Amount of Each Receipt this Period

250.00

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:

PAGE 49 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

REX HARRISON

A.

Mailing Address P.O. BOX 505

City

DOUBLE SPRINGS

State

AL

Zip Code

35553

FEC ID number of contributing
federal political committee.

C

Name of Employer

HARRISON DRUG

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11Al.8273

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

DIANA HARSHBARGER

B.

Mailing Address P.O. BOX 3563

City

KINGSPORT

State

TN

Zip Code

37664

FEC ID number of contributing
federal political committee.

C

Name of Employer

CUSTOM COMPOUNDING CENTERS

Occupation

OWNER

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11Al.7523

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

KEVIN HARTMAN

C.

Mailing Address 912 MANCHESTER DR.

City

NOLENSVILLE

State

TN

Zip Code

37135

FEC ID number of contributing
federal political committee.

C

Name of Employer

NASHVILLE PHARMACY SRV

Occupation

OWNER/ PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2014

Transaction ID : SA11Al.7876

Amount of Each Receipt this Period

1000.00

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

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

2200.00

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

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

FOR LINE NUMBER:

PAGE 50 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROBERT HATTON

A.

Mailing Address 402 RIVER STREET

City

VALDOSTA

State

GA

Zip Code

31601

FEC ID number of contributing federal political committee.

C

Name of Employer

RKS PHARMACEUTICALS INC

Occupation

PHARMACIST

Receipt For: 2014



Primary



General



Other (specify)

Runoff

Election Cycle-to-Date

1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8274

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

BILL HAYES

B.

Mailing Address 430 ANSTATT WAY

City

HAWORTH

State

NJ

Zip Code

07641

FEC ID number of contributing federal political committee.

C

Name of Employer

HAWORTH APOTHECARY

Occupation

OWNER / NCPA

Receipt For: 2014



Primary



General



Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8275

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

STEPHEN HEARD

C.

Mailing Address 211 PINK DOGWOOD LANE

City

POOLER

State

GA

Zip Code

31322

FEC ID number of contributing federal political committee.

C

Name of Employer

SOUTHERN LNG

Occupation

MANAGEMENT

Receipt For: 2014



Primary



General



Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2014

Transaction ID : SA11AI.7878

Amount of Each Receipt this Period

250.00

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

1250.00

TOTAL 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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JEFFREY HEDGES

A.

Mailing Address P.O. BOX H

City

NEW FLORENCE

State

PA

Zip Code

15944

FEC ID number of contributing
federal political committee.

C

Name of Employer

R J HEDGES & ASSOC.

Occupation

PHARMACY HEALTHCARE COMPLIANCE

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2014

Transaction ID : SA11AI.7879

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

HAL HENDERSON

B.

Mailing Address 4850 GOLDEN PKWY, STE B 305

City

BUFORD

State

GA

Zip Code

30518

FEC ID number of contributing
federal political committee.

C

Name of Employer

OMNI-CARE

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2014

Transaction ID : SA11AI.8277

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

MICHELLE HENDERSON

C.

Mailing Address P.O. BOX 580

City

RICHMOND HILL

State

GA

Zip Code

31324

FEC ID number of contributing
federal political committee.

C

Name of Employer

HENDERSON LAW FIRM

Occupation

ATTORNEY

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.7880

Amount of Each Receipt this Period

250.00

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:

PAGE 52 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MICHELLE HENDERSON

Mailing Address P.O. BOX 580

City

RICHMOND HILL

State

GA

Zip Code

31324

FEC ID number of contributing
federal political committee.

C

Name of Employer

HENDERSON LAW FIRM

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		19		2014

Transaction ID : SA11Al.7882

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JOHN HERR

Mailing Address 152 VISTA TERRACE

City

POMPTON LAKES

State

NJ

Zip Code

07442

FEC ID number of contributing
federal political committee.

C

Name of Employer

TOWN & COUNTRY COMPOUNDING

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11Al.7883

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

HENRY HERRING Jr.

Mailing Address 1919 KAOLLWOOD DR.

City

WILMINGTON

State

NC

Zip Code

28403

FEC ID number of contributing
federal political committee.

C

Name of Employer

MEDICAL CENTER PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11Al.7885

Amount of Each Receipt this Period

500.00

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:

PAGE 53 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOANN HICKMAN

A.

Mailing Address 103 TURKEY TRAIL

City

STATESBORO

State

GA

Zip Code

30458-9174

FEC ID number of contributing federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

Transaction ID : SA11AI.7887

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

WILLIAM R. HICKMAN

B.

Mailing Address 103 TURKEY TRAIL

City

STATESBORO

State

GA

Zip Code

30458-9174

FEC ID number of contributing federal political committee.

C

Name of Employer
DABBS, HICKMAN, HILL & CANNONOccupation
CPA

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

Transaction ID : SA11AI.7888

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

DOUG HIGGINS

C.

Mailing Address 301 W. CENTER ST.

City

PAXTON

State

IL

Zip Code

60957

FEC ID number of contributing federal political committee.

C

Name of Employer
DOUG'S COMPOUNDING PHARMACYOccupation
OWNER, RPH

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7889

Amount of Each Receipt this Period

500.00

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:

PAGE 54 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

CATHY HILL

A.

Mailing Address 1 TANNERS ROW

City

POOLER

State

GA

Zip Code

31322

FEC ID number of contributing
federal political committee.

C

Name of Employer
GEORGIA POWER

Occupation
VICE PRES.

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 18 / 2014

Transaction ID : SA11AI.7891

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JACK S. HILL

B.

Mailing Address P.O. BOX 486

City

REIDSVILLE

State

GA

Zip Code

30453

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE SENATOR

Occupation
STATE SENATOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : SA11AI.7893

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

PAUL P. HINCHEY

C.

Mailing Address 127 EAST 46TH STREET

City

SAVANNAH

State

GA

Zip Code

31405

FEC ID number of contributing
federal political committee.

C

Name of Employer
ST. JOSEPH'S/CANDLER

Occupation
PRESIDENT/CEO

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 25 / 2014

Transaction ID : SA11AI.8278

Amount of Each Receipt this Period

500.00

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:

PAGE 55 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

SHAWN HODGES

Mailing Address 1677 BURNT HICKORY RD. NW

City

MARIETTA

State

GA

Zip Code

30064

FEC ID number of contributing federal political committee.

C

Name of Employer

INNOVATION COMPOUNDING INC.

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11AI.7896

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

SHAWN HODGES

Mailing Address 1677 BURNT HICKORY RD. NW

City

MARIETTA

State

GA

Zip Code

30064

FEC ID number of contributing federal political committee.

C

Name of Employer

INNOVATION COMPOUNDING INC.

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

2200.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 21 / 2014

Transaction ID : SA11AI.7897

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

M.J. HOGAN

Mailing Address 2238 COHEN STREET

City

SAVANNAH

State

GA

Zip Code

31410

FEC ID number of contributing federal political committee.

C

Name of Employer

HOGAN MARINA

Occupation

SELF-EMPLOYED

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.8281

Amount of Each Receipt this Period

2000.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

GEORGE HOLTZMAN

A.

Mailing Address 801 FOREST ST.

City

HINESVILLE

State

GA

Zip Code

31313

FEC ID number of contributing federal political committee.

 Name of Employer
 COLDWELL BANKER

 Occupation
 REALTOR

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

Transaction ID : SA11AI.7899

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

EDMUND HORTON

B.

Mailing Address 2445A NW LOOP

City

STEPHENVILLE

State

TX

Zip Code

76401

FEC ID number of contributing federal political committee.

 Name of Employer
 SELF-EMPLOYED

 Occupation
 PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

Transaction ID : SA11AI.7901

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

ROBERT HOYE

C.

Mailing Address 4430 S MANHATTAN AVE.

City

TAMPA

State

FL

Zip Code

33611

FEC ID number of contributing federal political committee.

 Name of Employer
 SELF-EMPLOYED

 Occupation
 PHARMACIST

Receipt For: 2014

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7902

Amount of Each Receipt this Period

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

TOTAL 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:

PAGE 57 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROBERT HOYE

A.

Mailing Address 4430 S MANHATTAN AVE.

City

TAMPA

State

FL

Zip Code

33611

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

Transaction ID : SA11AI.8284

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JEAN HUNTSMAN

B.

Mailing Address 1477 DARBEE DR.

City

MORRISTOWN

State

TN

Zip Code

37814

FEC ID number of contributing federal political committee.

C

Name of Employer

COLLEGE PARK PHARMACY

Occupation

OWNER, NCPA

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

Transaction ID : SA11AI.8285

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

JANICE IZLAR

C.

Mailing Address 6 HUNTINGWOOD RETREAT

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing federal political committee.

C

Name of Employer

GA INSTITUTE FOR PLASTIC SURGE

Occupation

CRNA

Receipt For: 2014

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	1	4

Transaction ID : SA11AI.7492

Amount of Each Receipt this Period

1000.00

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:

PAGE 58 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROBERT S. JEPSON Jr.

A.

Mailing Address 15 LAKE STREET

SUITE 223

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing federal political committee.

C

Name of Employer
JEPSON ASSOCIATESOccupation
CEO

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 02 / 2014

Transaction ID : SA11AI.8293

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

CARY DALE JOHNSON

B.

Mailing Address 930 BRYANT RD.

City

BOAZ

State

AL

Zip Code

35956

FEC ID number of contributing federal political committee.

C

Name of Employer
BOAZ DISCOUNT DRUGSOccupation
PHARMACIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 19 / 2014

Transaction ID : SA11AI.7909

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

ERIC JOHNSON

C.

Mailing Address 128 BAYMEADOW PT.

City

SAVANNAH

State

GA

Zip Code

31405

FEC ID number of contributing federal political committee.

C

Name of Employer
HGBDOccupation
ARCHITECT

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 19 / 2014

Transaction ID : SA11AI.7911

Amount of Each Receipt this Period

250.00

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

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

3100.00

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

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

FOR LINE NUMBER:

PAGE 59 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

EVELYN JOHNSON

A.

Mailing Address 2608 CLUBHOUSE DR.

City

PLANT CITY

State

FL

Zip Code

33566

FEC ID number of contributing
federal political committee.

C

Name of Employer

XTRA DISCOUNT DRUGS

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		23		2014

Transaction ID : SA11AI.7913

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

T.J. JOHNSRUD

B.

Mailing Address 114 OAKWOOD DR.

City

CONRAD

State

IA

Zip Code

50621

FEC ID number of contributing
federal political committee.

C

Name of Employer

NUCARA PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7915

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C.L. JONES Jr.

C.

Mailing Address 525 OAK ST.

City

MORRISTOWN

State

TN

Zip Code

37813

FEC ID number of contributing
federal political committee.

C

Name of Employer

MORRISTOWN PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8298

Amount of Each Receipt this Period

400.00

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

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

900.00

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

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

FOR LINE NUMBER:

PAGE 60 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

DARIN JUDY

A.

Mailing Address 24 N. MAIN ST.

City

PETERSBURG

State

WV

Zip Code

26847

FEC ID number of contributing
federal political committee.

C

Name of Employer
JUDY'S DRUG STORE

Occupation
PHARMACY TECH

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : SA11AI.7919

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ERIC JUERGENS

B.

Mailing Address 502 E. EVA CIR.

City

SPRINGFIELD

State

OH

Zip Code

45504

FEC ID number of contributing
federal political committee.

C

Name of Employer
MADISON AVE. PHARMACY

Occupation
PHARMACIST, NCPA

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 19 / 2014

Transaction ID : SA11AI.7921

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

SHAWN A. KACHMAR

C.

Mailing Address 231 OLDE TOWNE ROAD

City

SAVANNAH

State

GA

Zip Code

31410

FEC ID number of contributing
federal political committee.

C

Name of Employer
HUNTER MACLEAN

Occupation
ATTORNEY

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 25 / 2014

Transaction ID : SA11AI.8300

Amount of Each Receipt this Period

150.00

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

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

1150.00

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

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

FOR LINE NUMBER:

PAGE 61 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOHN KANE

A.

Mailing Address 5 SPRING MARSH CIR

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

5100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		23		2014

Transaction ID : SA11AI.7923

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

REBECCA KEIGHTLEY

B.

Mailing Address 2 BLOOMSBURY PLACE

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

MEMORIAL HEALTH

Occupation

VP/ CHIEF COMMUNICATIONS OFFICE

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8301

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MICHAEL J KISTLER

C.

Mailing Address 109 MODENA ISLAND DRIVE

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

REAL ESTATE DEVELOPER

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2014

Transaction ID : SA11AI.7926

Amount of Each Receipt this Period

250.00

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:

PAGE 62 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BARRY KLEIN

A.

Mailing Address 64 GREAT OAK DR.

City

HUDSON

State

OH

Zip Code

44236

FEC ID number of contributing
federal political committee.

C

Name of Employer
KLEINS PHARMACIESOccupation
OWNER/PHARMACIST

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 01 / 2014

Transaction ID : SA11AI.8303

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JAMES KLUTTZ

B.

Mailing Address P.O. BOX 629

City

TYBEE ISLAND

State

GA

Zip Code

31328

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
AUTOMOTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11AI.7927

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

SANDRA KNIGHT

C.

Mailing Address 588 CHINA HILL RD.

City

MILAN

State

GA

Zip Code

31060

FEC ID number of contributing
federal political committee.

C

Name of Employer
KNIGHT FARMS INCORPORATEDOccupation
SECRETARY

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

700.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 02 / 2014

Transaction ID : SA11AI.8305

Amount of Each Receipt this Period

100.00

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

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

1100.00

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

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

FOR LINE NUMBER:

PAGE 63 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BRIAN KORNBLATT

A.

Mailing Address 1416 WALTHOUR ROAD

City

SAVANNAH

State

GA

Zip Code

31410

FEC ID number of contributing
federal political committee.

C

Name of Employer
EMERGENCY MEDICINEOccupation
PHYSICIAN

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2014

Transaction ID : SA11AI.7929

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

JOAN KORNBLATT

B.

Mailing Address 1416 WALTHOUR RD.

City

SAVANNAH

State

GA

Zip Code

31410

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
AUTHOR

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2014

Transaction ID : SA11AI.7930

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

BADRINATH KUMAR

C.

Mailing Address 4915 BROADWAY

City

NEW YORK

State

NY

Zip Code

10034

FEC ID number of contributing
federal political committee.

C

Name of Employer
INWOOD PHARMACYOccupation
PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		06		2014

Transaction ID : SA11AI.7932

Amount of Each Receipt this Period

500.00

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 64 OF 187
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial) JAMES A LAHAISE			Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>06 / 23 / 2014</div> </div>	
Mailing Address 536 EAST 44TH STREET			Transaction ID : SA11AI.8308	
City SAVANNAH	State GA	Zip Code 31405	Amount of Each Receipt this Period <div> <div></div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer THE COASTAL BANK		Occupation EVP		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date <div> <div></div> <div>1250.00</div> </div>		

Full Name (Last, First, Middle Initial) KARRY LaVIOLETTE			Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>05 / 14 / 2014</div> </div>	
Mailing Address 3316 MARTHA CUSTIS DRIVE			Transaction ID : SA11AI.7934	
City ALEXANDRIA	State VA	Zip Code 22302	Amount of Each Receipt this Period <div> <div></div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer NCPA		Occupation DIRECTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date <div> <div></div> <div>450.00</div> </div>		

Full Name (Last, First, Middle Initial) KARRY LA VIOLETTE			Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>07 / 02 / 2014</div> </div>	
Mailing Address 3316 MARTHA CUSTIS DR.			Transaction ID : SA11AI.8306	
City ALEXANDRIA	State VA	Zip Code 22302	Amount of Each Receipt this Period <div> <div></div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer NAT'L COMM PHARMACISTS ASSOC.		Occupation PHARMACIST-SR. DIRECTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff		Election Cycle-to-Date <div> <div></div> <div>250.00</div> </div>		

SUBTOTAL of Receipts This Page (optional).....			<div> <div></div> <div>750.00</div> </div>	
TOTAL This Period (last page this line number only).....			<div> <div></div> </div>	

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

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

FOR LINE NUMBER:

PAGE 65 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MICHAEL LEAKE

A.

Mailing Address 419 OHARA DR.

City

DANVILLE

State

KY

Zip Code

40422

FEC ID number of contributing
federal political committee.

C

Name of Employer
PCCAOccupation
PHARMACIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11AI.7937

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

CHARLES LEBEGERN

B.

Mailing Address 360 MCNEALY CIRCLE

City

PERKASIE

State

PA

Zip Code

18944

FEC ID number of contributing
federal political committee.

C

Name of Employer
HERITAGE PHARMACYOccupation
PRES. / CO-OWNER, NCPA

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 25 / 2014

Transaction ID : SA11AI.8311

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

A.G. LEE Jr.

C.

Mailing Address P.O. BOX 413

City

ALMA

State

GA

Zip Code

31510

FEC ID number of contributing
federal political committee.

C

Name of Employer
D L LEE, MEAT PACKING PLANTOccupation
OWNER

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : SA11AI.8314

Amount of Each Receipt this Period

250.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ELLIOTT LEKAWA**A.**

Mailing Address 13690 HIGHLAND SPRINGS

City

WICHITA

State

KS

Zip Code

67235

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRESTON PHARMACYOccupation
PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8316

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ROBERT LETCHER**B.**

Mailing Address 315 E CHARLTON ST.

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		12		2014

Transaction ID : SA11AI.7941

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

J. CURTIS LEWIS III**C.**

Mailing Address P.O. BOX 9745

City

SAVANNAH

State

GA

Zip Code

31412

FEC ID number of contributing
federal political committee.

C

Name of Employer
LEWIS BROADCASTING CO.Occupation
ATTORNEY

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.7943

Amount of Each Receipt this Period

250.00

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

1000.00

TOTAL 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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

J. CURTIS LEWIS III

A.

Mailing Address P.O. BOX 9745

City

SAVANNAH

State

GA

Zip Code

31412

FEC ID number of contributing federal political committee.

C

Name of Employer

LEWIS BROADCASTING CO.

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8317

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

LON LEWIS

B.

Mailing Address 191 MERION ST.

City

ST. SIMONS ISLAND

State

GA

Zip Code

31522

FEC ID number of contributing federal political committee.

C

Name of Employer

ALTAMA PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8318

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

WALTER N LEWIS

C.

Mailing Address P.O. BOX 60759

City

SAVANNAH

State

GA

Zip Code

31420

FEC ID number of contributing federal political committee.

C

Name of Employer

JC LEWIS FORD MOTOR CO

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.7944

Amount of Each Receipt this Period

1000.00

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

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

2750.00

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

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

FOR LINE NUMBER:

PAGE 68 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JAMES LOCKLEAR

A.

Mailing Address P.O. BOX 659

City

TYBEE ISLAND

State

GA

Zip Code

31328

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

BEACH BUM

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		19		2014

Transaction ID : SA11AI.7945

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

JUAN LOPEZ

B.

Mailing Address 407 BAYWOOD CIRCLE

City

PORT ORANGE

State

FL

Zip Code

32127

FEC ID number of contributing federal political committee.

C

Name of Employer

PHARMACY SPECIALIST

Occupation

PHARMACIST

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7946

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

PAMELA G. LOSSING

C.

Mailing Address 1 BEARD CREEK LANE

City

SAVANNAH

State

GA

Zip Code

31410

FEC ID number of contributing federal political committee.

C

Name of Employer

METRO PROPERTIES

Occupation

REAL ESTATE AGENT

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.7948

Amount of Each Receipt this Period

250.00

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

875.00

TOTAL 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:

PAGE 69 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WILLIAM H LOVETT

A.

Mailing Address 115 EAST JONES STREET

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing federal political committee.

C

Name of Employer

HOBD

Occupation

ENGINEER

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2014

Transaction ID : SA11AI.7949

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

BRANDALL LOVVORN

B.

Mailing Address 404 ALABAMA AVENUE

City

BREMEN

State

GA

Zip Code

30110

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8321

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JEFF LUREY

C.

Mailing Address 1082 JUDITH WAY

City

ATLANTA

State

GA

Zip Code

30324

FEC ID number of contributing federal political committee.

C

Name of Employer

GA ACADEMY OF IND PHARMACIES

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.7950

Amount of Each Receipt this Period

500.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JEFF LUREY**A.**

Mailing Address 1082 JUDITH WAY

City

ATLANTA

State

GA

Zip Code

30324

FEC ID number of contributing
federal political committee.

C

Name of Employer

GA ACADEMY OF IND PHARMACIES

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary
☒ Other (specify)

General

Runoff

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8322

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

PRAKASH MADDALI**B.**

Mailing Address 29 SPRINGFIELD CT.

City

PARSIPPANY

State

NJ

Zip Code

07054

FEC ID number of contributing
federal political committee.

C

Name of Employer

E & M PHARMACY

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐ Primary
☒ Other (specify)

General

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2014

Transaction ID : SA11AI.8323

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

EDDIE MADDEN**C.**

Mailing Address 200 SUGARCANE DRIVE

City

HARTWELL

State

GA

Zip Code

30643

FEC ID number of contributing
federal political committee.

C

Name of Employer

MADDEN'S PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary
☒ Other (specify)

General

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8325

Amount of Each Receipt this Period

500.00

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

1500.00

TOTAL 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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

TOM MAHONEY Sr.

Mailing Address 110 EAST OGLETHORPE AVE.

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing federal political committee.

C

Name of Employer

MAHONEY & MAHONEY, P.C.

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 24 / 2014

Transaction ID : SA11AI.8326

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

LUCY MALMBERG

Mailing Address 31 STONE TOWER LN

City

WILMINGTON

State

DE

Zip Code

19803

FEC ID number of contributing federal political committee.

C

Name of Employer

WEDGEWOOD PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 05 / 20 / 2014

Transaction ID : SA11AI.7527

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

PAUL MAMALAKIS

Mailing Address 820 MERIWEATHER DR.

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing federal political committee.

C

Name of Employer

ROSSER INTERNATIONAL

Occupation

ENGINEER

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

450.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 20 / 2014

Transaction ID : SA11AI.7955

Amount of Each Receipt this Period

250.00

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

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

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 72 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

TERRY MATHEWS**A.**

Mailing Address 1118 ASHTON BLUFF DR.

City

ATLANTA

State

GA

Zip Code

30319

FEC ID number of contributing
federal political committee.

C

Name of Employer

MATHEWS & MAXSELL, INC.

Occupation

GOV'T AFFAIRS CONSULTANT

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		14		2014

Transaction ID : SA11AI.7958

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

SCOTT MAXWELL**B.**

Mailing Address 3001 SEXTON CT.

City

CONYERS

State

GA

Zip Code

30013

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

GOV'T AFFAIRS CONSULTANT

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		14		2014

Transaction ID : SA11AI.7960

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

GEORGE MCALANIS Sr.**C.**

Mailing Address 405 SHAFFER RD.

City

MILLERSBURG

State

PA

Zip Code

17061

FEC ID number of contributing
federal political committee.

C

Name of Employer

MILLERSBURG PHARMACY

Occupation

PHARMACIST, NCPA

Receipt For: 2014



Primary



General



Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8330

Amount of Each Receipt this Period

500.00

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

1000.00

TOTAL 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:

PAGE 73 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BRUCE MCANALLY

A.

Mailing Address 2535 ELDORADO PKWY

City

MCKINNEY

State

TX

Zip Code

75070

FEC ID number of contributing federal political committee.

C

Name of Employer

PARAGON HEALTHCARE

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

2000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	5			2	0	1	4		

Transaction ID : SA11AI.7961

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JIMMY MCBRIDE

B.

Mailing Address 1106 EAGLE BEND RD.

City

CLINTON

State

TN

Zip Code

37716

FEC ID number of contributing federal political committee.

C

Name of Employer

CLINTON DRUG STORE

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	5			2	0	1	4		

Transaction ID : SA11AI.8332

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JOHN MCCALLUM

C.

Mailing Address 11704 OLD DEMERE RD.

City

ST. SIMONS ISLAND

State

GA

Zip Code

31522

FEC ID number of contributing federal political committee.

C

Name of Employer

JAM CAPITAL PARTNERS

Occupation

MANAGING PARTNER

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	4		

Transaction ID : SA11AI.8334

Amount of Each Receipt this Period

1000.00

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

2250.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 74 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JEFREY MCCRACKEN**A.**

Mailing Address 175 ZIMMER LANE

City

WAYNESBURG

State

PA

Zip Code

15370

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCCRACKEN PHARMACY

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8336

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

IVEY MCCURDY**B.**

Mailing Address 5 W. LEE AVE.

City

LAKELAND

State

GA

Zip Code

31635

FEC ID number of contributing
federal political committee.

C

Name of Employer

LAKELAND DRUG CO.

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2014

Transaction ID : SA11AI.8338

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

J. CLIFF MCCURRY**C.**

Mailing Address 837 MERIWETHER DR

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing
federal political committee.

C

Name of Employer

SEACREST PARTNERS

Occupation

VICE-CHAIRMAN

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		17		2014

Transaction ID : SA11AI.7964

Amount of Each Receipt this Period

100.00

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

1600.00

TOTAL 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:

PAGE 75 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOSEPH MCDOWELL

A.

Mailing Address 1914 CLARKSVILLE DR.

City

SCOTLAND NECK

State

NC

Zip Code

27874

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCDOWELLS PHARMACY INC.

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11AI.7965

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MICHAEL MCGEE

B.

Mailing Address P.O. BOX 672

City

MILLEDGEVILLE

State

GA

Zip Code

31059

FEC ID number of contributing
federal political committee.

C

Name of Employer

MEDICAL ARTS PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8340

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

FRED MCGINTY

C.

Mailing Address P.O. BOX 20778

City

ST SIMONS ISLAND

State

GA

Zip Code

31522

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCGINTY GORDON ASSOCIATES

Occupation

INSURANCE AGENT

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8342

Amount of Each Receipt this Period

250.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOHN MCKINNON

A.

Mailing Address 35 COVE DRIVE

City

SAVANNAH

State

GA

Zip Code

31419

FEC ID number of contributing federal political committee.

C

Name of Employer
LO COST PHARMACYOccupation
PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.7969

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

STEVEN MEEKS

B.

Mailing Address 3616 NINE RUN RD.

City

SCREVEN

State

GA

Zip Code

31560

FEC ID number of contributing federal political committee.

C

Name of Employer
BURCH FARMOccupation
FARMER

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		26		2014

Transaction ID : SA11AI.8344

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JAMES MERCER

C.

Mailing Address 21 MULBERRY BLUFF DRIVE

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing federal political committee.

C

Name of Employer
COLONIAL OILOccupation
VP/SALES

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.7974

Amount of Each Receipt this Period

500.00

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 77 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JULIA MIKELL

Mailing Address 632 ROSE DHU RD.

City

SAVANNAH

State

GA

Zip Code

31419

FEC ID number of contributing federal political committee.

C

Name of Employer

ST. JOSEPH'S / CANDLER

Occupation

PHYSICIAN

Receipt For: 2014



Primary



General



Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2014

Transaction ID : SA11AI.7975

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

SVETISLAV MILIC

Mailing Address 515 INMAN AVE.

City

COLONIA

State

NJ

Zip Code

07067

FEC ID number of contributing federal political committee.

C

Name of Employer

COLONIA NATURAL PHARMACY

Occupation

PHARMACIST

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7977

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

DREW MILLER

Mailing Address 221 LARAMIE RD.

City

GRIFFIN

State

GA

Zip Code

30224

FEC ID number of contributing federal political committee.

C

Name of Employer

WYNN'S RX

Occupation

PHARMACIST

Receipt For: 2014



Primary



General



Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8348

Amount of Each Receipt this Period

250.00

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

1250.00

TOTAL 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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

EDWARD L MILLER

A.

Mailing Address 4515 ARLINGTON CT.

City

GAINSVILLE

State

GA

Zip Code

30506

FEC ID number of contributing federal political committee.

C

Name of Employer

MEDICAL PARK PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2014

Transaction ID : SA11AI.8350

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MARTIN MILLER

B.

Mailing Address P.O. BOX 13804

City

SAVANNAH

State

GA

Zip Code

31416

FEC ID number of contributing federal political committee.

C

Name of Employer

COASTAL HOME CARE

Occupation

PRESIDENT

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : SA11AI.7983

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

MARTIN MILLER

C.

Mailing Address P.O. BOX 13804

City

SAVANNAH

State

GA

Zip Code

31416

FEC ID number of contributing federal political committee.

C

Name of Employer

COASTAL HOME CARE

Occupation

PRESIDENT

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8353

Amount of Each Receipt this Period

600.00

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

2100.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 79 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

RHONDA MILLER MORRISON**A.**

Mailing Address 212 S ELLIOTT AVE.

City

AURORA

State

MO

Zip Code

65605

FEC ID number of contributing
federal political committee.

C

Name of Employer

AURORA PROFESSIONAL PHARMACY

Occupation

CFO

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8346

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

EDDIE MIMBS**B.**

Mailing Address 4717 BEDFORD GLEN

City

FLOWERY BRANCH

State

GA

Zip Code

30542

FEC ID number of contributing
federal political committee.

C

Name of Employer

DIXIE CITY PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		10		2014

Transaction ID : SA11AI.7984

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

ART MINTON**C.**

Mailing Address 1301 BASCOMB DR

City

RALEIGH

State

NC

Zip Code

27614

FEC ID number of contributing
federal political committee.

C

Name of Employer

VILLAGE PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.7985

Amount of Each Receipt this Period

250.00

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

1000.00

TOTAL 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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MARTIN MINTZ**A.**

Mailing Address 6701 HARFORD RD.

City

PARKVILLE

State

MD

Zip Code

21234

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORTHERN PHARMACY & MED. EQUIP

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2014

Transaction ID : SA11AI.7987

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

RANDOLPH MOHABIR**B.**

Mailing Address 6 IRIS AVE.

City

FARMINGVILLE

State

NY

Zip Code

11738

FEC ID number of contributing
federal political committee.

C

Name of Employer

MEADOW DRUGS & SURGICAL

Occupation

OWNER / PHARMACIST

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : SA11AI.7989

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

HENRY MONSEES**C.**

Mailing Address 45 MULBERRY BLUFF DR

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing
federal political committee.

C

Name of Employer

SAVANNAH DISTRIBUTING CO. INC

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8355

Amount of Each Receipt this Period

2000.00

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

3000.00

TOTAL 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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROBERT MOODY**A.**

Mailing Address 644 MILLRUN COURT

City

MACON

State

GA

Zip Code

31210

FEC ID number of contributing
federal political committee.

C

Name of Employer

POWELLS/BLOOMFIELD PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2014

Transaction ID : SA11AI.7991

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

NORMA MORGAN**B.**

Mailing Address 1935 CLYO-KILDARE RD. GA 119

City

CLYO

State

GA

Zip Code

31303

FEC ID number of contributing
federal political committee.

C

Name of Employer

EFFINGHAM CO. HEALTH SYSTEM

Occupation

CEO

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2014

Transaction ID : SA11AI.7992

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

TERRY MORRIS**C.**

Mailing Address 4 PRESCOTT LANE

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

MLFP

Occupation

ENTREPRENEUR

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.7994

Amount of Each Receipt this Period

500.00

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

2000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

GRANT MOULTON**A.**

Mailing Address 5424 OAKWOOD CIR.

City

FALLON

State

NV

Zip Code

89406

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOVELOCK PHARMACYOccupation
PHARMACIST

Receipt For: 2014

☐ Primary
☒ Other (specify)

General

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2014

Transaction ID : SA11AI.8358

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

EDWARD MURRAY Jr.**B.**

Mailing Address 133 CANDLEWOOD DR.

City

ALMA

State

GA

Zip Code

31510

FEC ID number of contributing
federal political committee.

C

Name of Employer
BLUEBERRY PLANTATIONOccupation
OWNER

Receipt For: 2014

☐ Primary
☒ Other (specify)

General

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2014

Transaction ID : SA11AI.8360

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

EDWARD MURRAY Jr.**C.**

Mailing Address 133 CANDLEWOOD DR.

City

ALMA

State

GA

Zip Code

31510

FEC ID number of contributing
federal political committee.

C

Name of Employer
BLUEBERRY PLANTATIONOccupation
OWNER

Receipt For: 2014

☐ Primary
☒ Other (specify)

General

Runoff

Election Cycle-to-Date

2553.32

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		26		2014

Transaction ID : SA11AI.8596

Amount of Each Receipt this Period

1553.32

In-kind - FUNDRAISER VENUE

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

3053.32

TOTAL 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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ALFONSE MUTO

Mailing Address 305 OAK ST.

City

LEWISTON

State

NY

Zip Code

14092

FEC ID number of contributing federal political committee.

C

Name of Employer

PINE PHARMACY

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.8013

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ALFONSE MUTO

Mailing Address 305 OAK ST.

City

LEWISTON

State

NY

Zip Code

14092

FEC ID number of contributing federal political committee.

C

Name of Employer

PINE PHARMACY

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2014

Transaction ID : SA11AI.8362

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

THIEU NGUYEN

Mailing Address 1408 Q ST. NW #13

City

WASHINGTON

State

DC

Zip Code

20009

FEC ID number of contributing federal political committee.

C

Name of Employer

CYPRESS COMPOUNDING PHARMACY

Occupation

VP OPERATIONS

Receipt For: 2014

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7996

Amount of Each Receipt this Period

250.00

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

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

1000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAVID NICOLETTI**A.**

Mailing Address 4003 N LINDSTROM PLACE

City

TUCSON

State

AZ

Zip Code

85750

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

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7519

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

BORIS NIYAZOV**B.**

Mailing Address 1302 SECOND AVE.

City

NEW YORK

State

NY

Zip Code

11374

FEC ID number of contributing
federal political committee.

C

Name of Employer

HEALTHSOURCE PHARMACY

Occupation

PRES. / CHIEF PHARMACIST

Receipt For: 2014



Primary



General



Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11AI.8000

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

PATRICK O'CONNOR**C.**

Mailing Address 218 WEST STATE STREET

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing
federal political committee.

C

Name of Employer

OLIVER MANER

Occupation

ATTORNEY

Receipt For: 2014



Primary



General



Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8365

Amount of Each Receipt this Period

250.00

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

1750.00

TOTAL 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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHARLES OBEID**A.**

Mailing Address 513 CHARLTES PLACE

City

PITTSBURGH

State

PA

Zip Code

18640

FEC ID number of contributing
federal political committee.

C

Name of Employer

SHEEHANS PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2014

Transaction ID : SA11AI.8366

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

KEVIN OBERLANDER**B.**

Mailing Address 826 N. ANDERSON

City

BISMARCK

State

ND

Zip Code

58501

FEC ID number of contributing
federal political committee.

C

Name of Employer

DAKOTA PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.8002

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MIKE ODOM**C.**

Mailing Address 104 GREAT OAKS WAY

City

RICHMOND HILL

State

GA

Zip Code

31324

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE COASTAL BANK

Occupation

EXEC. VP

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2014

Transaction ID : SA11AI.8004

Amount of Each Receipt this Period

1000.00

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MICHEAL OHNEMUS**A.**

Mailing Address 24310 MOULTON PKWY, STE G

City

PROVINCE

State

CA

Zip Code

92637

FEC ID number of contributing
federal political committee.

C

Name of Employer

EL TORO PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2014

Transaction ID : SA11AI.8005

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

SVEIN OIE**B.**

Mailing Address 151 BRANFORD PL

City

ATHENS

State

GA

Zip Code

30606

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNIV. SYSTEM OF GA

Occupation

ADMIN

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8368

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MATTHEW OSTERHAUS**C.**

Mailing Address 311 S. 2ND ST

City

MAQUOKETA

State

IA

Zip Code

52060

FEC ID number of contributing
federal political committee.

C

Name of Employer

OSTERHAUS PHARMACY

Occupation

OWNER

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8369

Amount of Each Receipt this Period

250.00

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

1000.00

TOTAL 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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JAMES L. PANNELL

A.

Mailing Address P.O. BOX 8050

City

SAVANNAH

State

GA

Zip Code

31412

FEC ID number of contributing federal political committee.

C

Name of Employer

GRAY, PANNELL & WOODWARD

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2014

Transaction ID : SA11AI.8007

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JON PANNELL

B.

Mailing Address 24 DRAYTON ST., STE 1000

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing federal political committee.

C

Name of Employer

PANNELL & WOODWARD LLP

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2014

Transaction ID : SA11AI.8008

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

GREG PARKER

C.

Mailing Address 222 DRAYTON ST

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing federal political committee.

C

Name of Employer

PARKERS

Occupation

CEO

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2014

Transaction ID : SA11AI.8017

Amount of Each Receipt this Period

1000.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

LEON PARRISH

A.

Mailing Address 3 EAGLE RIDGE DR.

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN FINANCIALOccupation
PRES. / CEO

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 16 / 2014

Transaction ID : SA11AI.8018

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

LJ PARRISH

B.

Mailing Address 228 CREEK SIDE DR

City

SWAINSBORO

State

GA

Zip Code

30401

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 02 / 2014

Transaction ID : SA11AI.8374

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

HEMALI PATEL

C.

Mailing Address 11583 SUMMER HAVEN BLVD N

City

JACKSONVILLE

State

FL

Zip Code

32258

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
PHARMACIST

Receipt For: 2014

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11AI.7516

Amount of Each Receipt this Period

2600.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOHN PATTERSON

A.

Mailing Address 11 LONGBRIDGE RD.

City

SAVANNAH

State

GA

Zip Code

31410

FEC ID number of contributing federal political committee.

C

Name of Employer

JCB CONSTR. EQUIP.

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11AI.8022

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MICHAEL PAVLOVICH

B.

Mailing Address 238 SAVONA WALK

City

LONG BEACH

State

CA

Zip Code

90803

FEC ID number of contributing federal political committee.

C

Name of Employer

WESTCLIFF COMPOUNDING PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.8375

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JASON PEDIGO

C.

Mailing Address 37 E 50TH STREET

City

SAVANNAH

State

GA

Zip Code

31405

FEC ID number of contributing federal political committee.

C

Name of Employer

ELLIS PAINTER, RATERREE & ADAM

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : SA11AI.8024

Amount of Each Receipt this Period

250.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BENJAMIN M. PERKINS

A.

Mailing Address 10 MARSH POINT DRIVE

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing
federal political committee.

C

Name of Employer
OLIVER MANER LLP

Occupation

PARTNER/ATTORNEY

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

449.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8378

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

HUBERT PERKINS

B.

Mailing Address P.O. BOX 1025

City

FRANKLIN

State

TX

Zip Code

77856

FEC ID number of contributing
federal political committee.

C

Name of Employer
DUFFY DRUG CO.

Occupation

PRES.

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11AI.8026

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JESSE PETREA III

C.

Mailing Address 108 LOYER LANE

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALTRUS ASSISTED LIVING

Occupation

CEO / CO-OWNER

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8379

Amount of Each Receipt this Period

1000.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

GRAHAM PIGG

A.

Mailing Address 1601 OLD MILL RD.

City

LINCOLNTON

State

NC

Zip Code

28092

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11AI.8028

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

GRAHAM PIGG

B.

Mailing Address 1601 OLD MILL RD.

City

LINCOLNTON

State

NC

Zip Code

28092

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

750.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : SA11AI.8381

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

LAURA PIRKLE

C.

Mailing Address 851 FLORA ELLEN ST

City

HINESVILLE

State

GA

Zip Code

31313

FEC ID number of contributing
federal political committee.

C

Name of Employer

SAVANNAH COUNTRY DAY SCHOOL

Occupation

EDUCATOR

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : SA11AI.8030

Amount of Each Receipt this Period

1000.00

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

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

1750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WILLIAM PITTMAN**A.**

Mailing Address 406 S QUEEN ST.

City

WINDSOR

State

NC

Zip Code

27983

FEC ID number of contributing
federal political committee.

C

Name of Employer
WAKEMEDOccupation
HOSPITALIST

Receipt For: 2014

☐ Primary
☒ Other (specify)

General

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8382

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

SCOTT POPYK**B.**

Mailing Address 21174 DUNDEE

City

NOVI

State

MO

Zip Code

48375

FEC ID number of contributing
federal political committee.

C

Name of Employer
HEALTH DIMENSIONSOccupation
PHARMACIST

Receipt For: 2014

☒ Primary
☐ Other (specify)

General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		18		2014

Transaction ID : SA11AI.8031

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

BARNARD PORTMAN**C.**

Mailing Address P.O. BOX 9087

City

SAVANNAH

State

GA

Zip Code

31412

FEC ID number of contributing
federal political committee.

C

Name of Employer
PORTMAN AND RALEYOccupation
ATTORNEY

Receipt For: 2014

☐ Primary
☒ Other (specify)

General

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

Transaction ID : SA11AI.8036

Amount of Each Receipt this Period

250.00

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

1250.00

TOTAL 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

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PAGE 93 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

WILLIAM PRATHER

A.

Mailing Address P.O. BOX 456

City

BLUE RIDGE

State

GA

Zip Code

30513

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8384

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

KERRY PRICKETT

B.

Mailing Address 740 DONNA DR.

City

VESTAVIA HILLS

State

AL

Zip Code

35226

FEC ID number of contributing
federal political committee.

C

Name of Employer

MEDICAL CENTER PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2014

Transaction ID : SA11AI.8385

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

SCOTT RASPLICKA

C.

Mailing Address 125 E. 44TH ST.

City

SAVANNAH

State

GA

Zip Code

31405

FEC ID number of contributing
federal political committee.

C

Name of Employer

DELTA METALS, INC.

Occupation

CONTRACTOR

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2014

Transaction ID : SA11AI.8398

Amount of Each Receipt this Period

250.00

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

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

700.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JAMES RAY

A.

Mailing Address 2400 AVALON AVE.

City

MUSCLE SHOALS

State

AL

Zip Code

35661

FEC ID number of contributing
federal political committee.

C

Name of Employer

AVALON DISCOUNT DRUGS

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		02		2014

Transaction ID : SA11AI.8046

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

EDWARD REYNOLDS

B.

Mailing Address 1420 EVANS STREET

City

BAINBRIDGE

State

GA

Zip Code

39819

FEC ID number of contributing
federal political committee.

C

Name of Employer

BAINBRIDGE PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2014

Transaction ID : SA11AI.8048

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

F.W. RICHARDS Jr.

C.

Mailing Address 909 W SYCAMORE ST.

City

CHASE CITY

State

VA

Zip Code

23924

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2014

Transaction ID : SA11AI.8049

Amount of Each Receipt this Period

500.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JEFF RICHARDSON

A.

Mailing Address 135 LATHEMS MILL LN

City

BALL GROUND

State

GA

Zip Code

30107

FEC ID number of contributing federal political committee.

C

Name of Employer

BALL GROUND PHARMACY

Occupation

RPH

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		10		2014

Transaction ID : SA11AI.8051

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

BRIAN RICKARD

B.

Mailing Address 241 BOB SHARPE RD.

City

VIDALIA

State

GA

Zip Code

30474

FEC ID number of contributing federal political committee.

C

Name of Employer

ALLCARE PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.8053

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

KRISTIN RIDDLE

C.

Mailing Address 4 DOWNWIND AVE.

City

GREENBRIAR

State

AZ

Zip Code

72058

FEC ID number of contributing federal political committee.

C

Name of Employer

US COMPOUNDING

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.8055

Amount of Each Receipt this Period

250.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MARK RILEY

Mailing Address 19300 RILEY ROAD

City

LITTLE ROCK

State

AR

Zip Code

72206

FEC ID number of contributing federal political committee.

C

Name of Employer

ARKANSAS PHARMACIST ASSOC.

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		06		2014

Transaction ID : SA11AI.8057

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

STEVE RINGS

Mailing Address 221 W MAIN ST.

City

MONTPELIER

State

OH

Zip Code

43543

FEC ID number of contributing federal political committee.

C

Name of Employer

RINGS PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.8058

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

CARLOS RODRIGUEZ-FEO

Mailing Address P.O. BOX 281

City

LEXINGTON

State

GA

Zip Code

30648

FEC ID number of contributing federal political committee.

C

Name of Employer

SKIP SHOP PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

Transaction ID : SA11AI.8060

Amount of Each Receipt this Period

250.00

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

1000.00

TOTAL 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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

CRAIG ROOT

Mailing Address 117 OSBORNE STREET

City

ST. MARY'S

State

GA

Zip Code

31558

FEC ID number of contributing federal political committee.

C

Name of Employer

VISTA OUTDOOR CORP

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : SA11AI.8061

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JAMES ROUNTREE

Mailing Address 525 E. BROUGHTON ST.

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

INSURANCE

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : SA11AI.8062

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

GARY RUSSELL

Mailing Address 4711 BROWN RD.

City

MADISONVILLE

State

KY

Zip Code

42431

FEC ID number of contributing federal political committee.

C

Name of Employer

BLUEGRASS PHARMACY

Occupation

PHARMACIST/OWNER

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 23 / 2014

Transaction ID : SA11AI.8407

Amount of Each Receipt this Period

500.00

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

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PAGE 98 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

SHUKRI SALIBA

A.

Mailing Address 4620 HARVEY WAY

City

LONG BEACH

State

CA

Zip Code

90808

FEC ID number of contributing federal political committee.

C

Name of Employer

ST. LUKE PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		22		2014

Transaction ID : SA11AI.8065

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JIM SANDERS

B.

Mailing Address 310 AZALEA CIRCLE

City

SWAINSBORO

State

GA

Zip Code

30401

FEC ID number of contributing federal political committee.

C

Name of Employer

MEDICAL CENTER PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8409

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

ROBERT W. SCHIVERA

C.

Mailing Address P.O. BOX 10186

City

SAVANNAH

State

GA

Zip Code

31412

FEC ID number of contributing federal political committee.

C

Name of Employer

OLIVER MANER LLP

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8410

Amount of Each Receipt this Period

250.00

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

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PAGE 99 OF 187

(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAVID SCHOMBERG Jr.

A.

Mailing Address 2560 INNISFAIL LANE

City

CLEMMONS

State

NC

Zip Code

27012

FEC ID number of contributing
federal political committee.

C

Name of Employer

CAROLINA PHARMACY SERVICES

Occupation

PHARMACY OWNER

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8411

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

WADE SCOTT

B.

Mailing Address 107 TROON WAY

City

MACON

State

GA

Zip Code

31210

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCOTT'S HEALTH MART PHARMACY

Occupation

PHARMACIST/OWNER, NCPA

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8413

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

WILLIAM SEARCY

C.

Mailing Address 406 E. 44TH STREET

City

SAVANNAH

State

GA

Zip Code

31405

FEC ID number of contributing
federal political committee.

C

Name of Employer

BRANNEN, SEARCY & SMITH

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2014

Transaction ID : SA11AI.8067

Amount of Each Receipt this Period

500.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

SWANN SEILER

A.

Mailing Address 508 E STATE ST

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing federal political committee.

C

Name of Employer
GEORGIA POWEROccupation
MANAGER

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2014

Transaction ID : SA11AI.8068

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

MARK SENN

B.

Mailing Address 2743 PERIMETER PARKWAY

City

AUGUSTA

State

GA

Zip Code

30909

FEC ID number of contributing federal political committee.

C

Name of Employer
BLANCHARD & CALHOUNOccupation
REAL ESTATE

Receipt For: 2014

☒ Primary☐ General☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2014

Transaction ID : SA11AI.7434

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

BONNIE SHARPE

C.

Mailing Address P.O. BOX 72148

City

ALBANY

State

GA

Zip Code

31708

FEC ID number of contributing federal political committee.

C

Name of Employer
BUY RITE DRUGSOccupation
PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2014

Transaction ID : SA11AI.8073

Amount of Each Receipt this Period

500.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

STEVEN SIMENSON

A.

Mailing Address 5165 156TH LANE, NW

City

RAMSEY

State

MN

Zip Code

55303

FEC ID number of contributing federal political committee.

C

Name of Employer

GOODRICH PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8420

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JOHN SIMKINS

B.

Mailing Address 115 S. MAPLEWOOD DR.

City

SOMERSET

State

KY

Zip Code

42501

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8422

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

BEN SLADE

C.

Mailing Address 109 HAWKINS ISLAND CIR.

City

ST. SIMONS ISLAND

State

GA

Zip Code

31522

FEC ID number of contributing federal political committee.

C

Name of Employer

ST. SIMONS LAND TRUST

Occupation

EXE. DIRECTOR

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2014

Transaction ID : SA11AI.8578

Amount of Each Receipt this Period

250.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MATHEW SLAKOPER

Mailing Address 411 DELAWARE AVE.

City

PENNDL

State

PA

Zip Code

19047

FEC ID number of contributing federal political committee.

C

Name of Employer
MAT'S PHARMACYOccupation
OWNER

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11AI.8079

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

CHARLES SMITH

Mailing Address 921 LARKSPUR LANE

City

ST. MARY'S

State

GA

Zip Code

31558

FEC ID number of contributing federal political committee.

C

Name of Employer
GILBERT HARRELL SUMERFORDOccupation
ATTORNEY

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		21		2014

Transaction ID : SA11AI.8081

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

CHARLES SMITH

Mailing Address 921 LARKSPUR LANE

City

ST. MARY'S

State

GA

Zip Code

31558

FEC ID number of contributing federal political committee.

C

Name of Employer
GILBERT HARRELL SUMERFORDOccupation
ATTORNEY

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2014

Transaction ID : SA11AI.8426

Amount of Each Receipt this Period

100.00

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

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

1200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAVE SMITH**A.**

Mailing Address 210 16TH AVE.

City

SANTA CRUZ

State

CA

Zip Code

95062

FEC ID number of contributing
federal political committee.

C

Name of Employer

A & D SPECIALTY PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.8082

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

DONALD SMITH**B.**

Mailing Address 802 E MEDICAL CT.

City

POST FALLS

State

ID

Zip Code

83854

FEC ID number of contributing
federal political committee.

C

Name of Employer

MEDICINE MAN WEST PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.8084

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

KIMBERLY SMITH**C.**

Mailing Address 509 WHITAKER ST.

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8429

Amount of Each Receipt this Period

2600.00

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

3100.00

TOTAL 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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

TERESA SMITH

A.

Mailing Address 230 ELI ROAD

City

PEMBROKE

State

GA

Zip Code

31321

FEC ID number of contributing federal political committee.

C

Name of Employer

BEDINGFIELD PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 07 / 2014

Transaction ID : SA11AI.7440

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

TERESA SMITH

B.

Mailing Address 230 ELI ROAD

City

PEMBROKE

State

GA

Zip Code

31321

FEC ID number of contributing federal political committee.

C

Name of Employer

BEDINGFIELD PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 07 / 2014

Transaction ID : SA11AI.8086

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

PHILIP SOLOMONS Jr.

C.

Mailing Address 31 EAST 49TH STREET

City

SAVANNAH

State

GA

Zip Code

31405-2124

FEC ID number of contributing federal political committee.

C

Name of Employer

SOLOMONS COMPANY

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.8431

Amount of Each Receipt this Period

1500.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOHN T. SOUTH III

A.

Mailing Address 12 WATER WITCH CROSSING

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing federal political committee.

C

Name of Employer
SOUTH UNIVERSITYOccupation
CHANCELLOR

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

3600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2014

Transaction ID : SA11AI.8089

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

DAVID SOVCHEN

B.

Mailing Address 7 SALTWIND CIRCLE

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing federal political committee.

C

Name of Employer
TRI-RIVER FOODS LPOccupation
PARTNER

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2014

Transaction ID : SA11AI.8432

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

S.G. SPRUILL

C.

Mailing Address 1531 HWY 184 N

City

TOCCOA

State

GA

Zip Code

30577

FEC ID number of contributing federal political committee.

C

Name of Employer
MADDOX DRUGSOccupation
PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8433

Amount of Each Receipt this Period

500.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

CARL STANLEY

A.

Mailing Address P.O. BOX 249

City

GORDON

State

GA

Zip Code

31031

FEC ID number of contributing
federal political committee.

C

Name of Employer
GORDON DRUG CO.

Occupation
PHARMACIST

Receipt For: 2014

☐ Primary
☒ Other (specify)

General

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11AI.8094

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

SPENCER STEPHENS

B.

Mailing Address 782 SCOUT CREEK TR.

City

HOOVER

State

AL

Zip Code

35244

FEC ID number of contributing
federal political committee.

C

Name of Employer
STEPHEN'S PHARMACY

Occupation
PHARMACIST

Receipt For: 2014

☒ Primary
☐ Other (specify)

General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		01		2014

Transaction ID : SA11AI.8096

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JERON STOKES

C.

Mailing Address 501 STONEBRIDGE PATH CT

City

ST. AUGUSTINE

State

FL

Zip Code

32092

FEC ID number of contributing
federal political committee.

C

Name of Employer
MEDIMIX SPECIALTY PHARMACY

Occupation
PHARMACIST

Receipt For: 2014

☒ Primary
☐ Other (specify)

General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.7525

Amount of Each Receipt this Period

1000.00

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

2000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JERON STOKES**A.**

Mailing Address 501 STONEBRIDGE PATH CT

City

ST. AUGUSTINE

State

FL

Zip Code

32092

FEC ID number of contributing
federal political committee.

C

Name of Employer

MEDIMIX SPECIALTY PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2014

Transaction ID : SA11AI.8435

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

D. STONE**B.**

Mailing Address 150 S. LEROY ST

City

METTER

State

GA

Zip Code

30439

FEC ID number of contributing
federal political committee.

C

Name of Employer

IHS PHARMACY & GIFTS

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8437

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

THOMAS STRICKLAND Jr.**C.**

Mailing Address P.O. BOX 295

City

SPRINGFIELD

State

GA

Zip Code

31329

FEC ID number of contributing
federal political committee.

C

Name of Employer

STRICKLAND FUNERAL HOME

Occupation

OWNER

Receipt For: 2014

☒

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.8098

Amount of Each Receipt this Period

300.00

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

1300.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MARY SUMMERFORD

A.

Mailing Address 4 JAYMEE LANE

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing federal political committee.

C

Name of Employer
OLIVER MANNER LLPOccupation
ATTORNEY

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8439

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

BRIAN SWEATT

B.

Mailing Address 1236 MCFARLAND BLVD, NE

City

TUSCALOOSA

State

AL

Zip Code

35406

FEC ID number of contributing federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2014

Transaction ID : SA11AI.8441

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

BEN TARBUTTON

C.

Mailing Address P.O. BOX 269

City

SANDERSVILLE

State

GA

Zip Code

31082

FEC ID number of contributing federal political committee.

C

Name of Employer
SANDERSVILLE RAILROAD CO.Occupation
ASSISTANT VP

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2014

Transaction ID : SA11AI.8103

Amount of Each Receipt this Period

1000.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHARLES TARBUTTON

A.

Mailing Address P.O. BOX 269

City

SANDERSVILLE

State

GA

Zip Code

31082

FEC ID number of contributing
federal political committee.

C

Name of Employer

SANDERSVILLE RAILROAD CO.

Occupation

ASSISTANT VP

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		05		2014

Transaction ID : SA11AI.8104

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JOHN M TATUM

B.

Mailing Address P.O. BOX 9848

City

SAVANNAH

State

GA

Zip Code

31412

FEC ID number of contributing
federal political committee.

C

Name of Employer

HMED

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

1100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8445

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

LINDSAY THOMAS

C.

Mailing Address 12854 WAYCROSS HWY

City

SCREVEN

State

GA

Zip Code

31560

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11AI.8110

Amount of Each Receipt this Period

500.00

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

BILL THOMPSON

Mailing Address 369 CANARY DR.

City

HOLLIDAYSBURG

State

PA

Zip Code

16648

FEC ID number of contributing federal political committee.

C

Name of Employer

THOMPSON PHARMACY

Occupation

PHARMACIST / OWNER

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		13		2014

Transaction ID : SA11AI.8111

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ROBERT T. THOMPSON III

Mailing Address 222 CATALINA DR.

City

TYBEE ISLAND

State

GA

Zip Code

31328

FEC ID number of contributing federal political committee.

C

Name of Employer

SAV. PILOTS ASSOC.

Occupation

RIVER PILOT

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2014

Transaction ID : SA11AI.8113

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

WILLIAM TOMPKINS

Mailing Address 112 BISHOPS GATE RD.

City

GRAND ISLAND

State

NY

Zip Code

14072

FEC ID number of contributing federal political committee.

C

Name of Employer

PINE PHARMACY

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2014

Transaction ID : SA11AI.8448

Amount of Each Receipt this Period

500.00

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

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

3600.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

DANNY TOTH

A.

Mailing Address 609 NEWTON ROAD

City

LAGRANGE

State

GA

Zip Code

30240

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOLMES REXALL PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.8115

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

RONALD TUCKER

B.

Mailing Address P.O. BOX 794

City

POOLER

State

GA

Zip Code

31322

FEC ID number of contributing
federal political committee.

C

Name of Employer

MOCK PLUMBING & MECHANICAL

Occupation

PLUMBER

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 25 / 2014

Transaction ID : SA11AI.8452

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

CINDY TURNER

C.

Mailing Address 248 TWIN LAKES RD.

City

NICHOLLS

State

GA

Zip Code

31554

FEC ID number of contributing
federal political committee.

C

Name of Employer

BACON COUNTY HOSPITAL

Occupation

CEO

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : SA11AI.8460

Amount of Each Receipt this Period

300.00

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

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

800.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MICHAEL TURSI

Mailing Address P.O. BOX 39

City

MOUNT LAUREL

State

NJ

Zip Code

08054

FEC ID number of contributing
federal political committee.

C

Name of Employer
STOKES HEALTHCARE

Occupation
PHARMACY MANAGER

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 06 / 2014

Transaction ID : SA11AI.8123

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

CAREY VAUGHAN

Mailing Address 168 NSUGAR CREEK RD.

City

BUCKHEAD

State

GA

Zip Code

30625

FEC ID number of contributing
federal political committee.

C

Name of Employer
LAKE COUNTRY PHARMACY

Occupation
PHARMACIST

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 05 / 30 / 2014

Transaction ID : SA11AI.8125

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

EVAN VICKERS

Mailing Address 2166 N COBBLE CREEK DR.

City

CEDAR CITY

State

UT

Zip Code

84721

FEC ID number of contributing
federal political committee.

C

Name of Employer
BULLOCHS DRUG STORE

Occupation
PHARMACIST / OWNER

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 09 / 2014

Transaction ID : SA11AI.8127

Amount of Each Receipt this Period

250.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

LAURA WAGNER

A.

Mailing Address 246 SOUTHSIDE RD.

City

ODEN

State

AZ

Zip Code

71961

FEC ID number of contributing
federal political committee.

C

Name of Employer

MOUNT IDA PHARMACY

Occupation

PHARMACIST, AAP MEMB

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

2600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	1	4

Transaction ID : SA11AI.8129

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

MARION WAINRIGHT

B.

Mailing Address 3885 MAIN ST.

City

FOLKSTON

State

GA

Zip Code

31537

FEC ID number of contributing
federal political committee.

C

Name of Employer

FOLKSTON PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

Transaction ID : SA11AI.8467

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

DON WALDRON

C.

Mailing Address P.O. BOX 3790

City

MERIDIAN

State

MS

Zip Code

39303

FEC ID number of contributing
federal political committee.

C

Name of Employer

MR. DISCOUNT DRUGS

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	1	4

Transaction ID : SA11AI.8132

Amount of Each Receipt this Period

500.00

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

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

3350.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROBERT WARNOCK**A.**

Mailing Address 1060 RIVERHILL DRIVE

City

BISHOP

State

GA

Zip Code

30621

FEC ID number of contributing
federal political committee.

C

Name of Employer

PRUITT CORP-UNITED HERALTH CAR

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2014

Transaction ID : SA11AI.7494

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

ROBERT WARNOCK**B.**

Mailing Address 1060 RIVERHILL DRIVE

City

BISHOP

State

GA

Zip Code

30621

FEC ID number of contributing
federal political committee.

C

Name of Employer

PRUITT CORP-UNITED HERALTH CAR

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2014

Transaction ID : SA11AI.7496

Amount of Each Receipt this Period

2400.00

Full Name (Last, First, Middle Initial)

FLYNN WARREN**C.**

Mailing Address 1081 LANE CREEK CIRCLE

City

BISHOP

State

GA

Zip Code

30621

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8470

Amount of Each Receipt this Period

250.00

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

5250.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

GEORGE WARREN

A.

Mailing Address 2 EAST MAGNOLIA AVE

City

EUSTIS

State

FL

Zip Code

32726

FEC ID number of contributing federal political committee.

C

Name of Employer

BAY PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		12		2014

Transaction ID : SA11AI.8140

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

CYNTHIA WATERS

B.

Mailing Address 73 BLUFF DR

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

HOMEMAKER

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		23		2014

Transaction ID : SA11AI.8142

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

DON WATERS

C.

Mailing Address 73 BLUFF DR

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing federal political committee.

C

Name of Employer

PETER BRASSELER HOLDINGS

Occupation

EXECUTIVE

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		23		2014

Transaction ID : SA11AI.8143

Amount of Each Receipt this Period

2600.00

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

5450.00

TOTAL 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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JAMES WATERS

A.

Mailing Address 4623 TALLEY HILL LANE

City

WILMINGTON

State

DE

Zip Code

19803

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		16		2014

Transaction ID : SA11AI.8144

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

FRED WEBSTER

B.

Mailing Address P.O. BOX 296

City

SPARTA

State

GA

Zip Code

31087

FEC ID number of contributing federal political committee.

C

Name of Employer

WEBSTER'S PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8471

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

WILLIAM WEGE

C.

Mailing Address 414 DEERWOOD ROAD

City

HINESVILLE

State

GA

Zip Code

31313

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

DENTIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2014

Transaction ID : SA11AI.8148

Amount of Each Receipt this Period

500.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

TONY WELDER

A.

Mailing Address 1314 BAYVIEW COURT

City

BISMARCK

State

ND

Zip Code

58504

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8474

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

DAVID WELLS

B.

Mailing Address 250 WAGON ROAD

City

SYLVANIA

State

GA

Zip Code

30467

FEC ID number of contributing federal political committee.

C

Name of Employer

WELLS PHARMACY SERVICES

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2014

Transaction ID : SA11AI.8149

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

WAYNE WEST

C.

Mailing Address 2305 CHARLES AVE.

City

BURLESON

State

TX

Zip Code

76028

FEC ID number of contributing federal political committee.

C

Name of Employer

BEST VALUE PHARMACIES INC.

Occupation

PHARMACIST, NCPA

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2014

Transaction ID : SA11AI.8475

Amount of Each Receipt this Period

500.00

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

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

1100.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

THOMAS WHITWORTH

A.

Mailing Address 3469 WEST POINT ROAD

City

LAGRANGE

State

GA

Zip Code

30240

FEC ID number of contributing federal political committee.

C

Name of Employer

CORLEY AND MCCLENDON

Occupation

OWNER

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8477

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

THOMAS WHITWORTH

B.

Mailing Address 3469 WEST POINT ROAD

City

LAGRANGE

State

GA

Zip Code

30240

FEC ID number of contributing federal political committee.

C

Name of Employer

CORLEY AND MCCLENDON

Occupation

OWNER

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11AI.8478

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

ANDREW WILKES

C.

Mailing Address 203 EAST 45TH STREET

City

SAVANNAH

State

GA

Zip Code

31405

FEC ID number of contributing federal political committee.

C

Name of Employer

OLIVER MANNER LLP

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8479

Amount of Each Receipt this Period

250.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MARC WILKINSON

A.

Mailing Address 4113 THACKERY CT.

City

KINGSPORT

State

TN

Zip Code

37663

FEC ID number of contributing
federal political committee.

C

Name of Employer

CUSTOM COMPOUNDING CENTER

Occupation

DIR OF MARKETING

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2014

Transaction ID : SA11AI.8152

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

ANSLEY WILLIAMS

B.

Mailing Address 322 E FACTORS WALK

City

SAVANNAH

State

GA

Zip Code

31401

FEC ID number of contributing
federal political committee.

C

Name of Employer

FIDDLERS CRAB HOUSE LLC

Occupation

OWNER

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2014

Transaction ID : SA11AI.8154

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

FRED WILLIAMS

C.

Mailing Address 2680 QUACCO ROAD

City

POOLER

State

GA

Zip Code

31322

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRED WILLIAMS HOMES

Occupation

BUILDER

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8483

Amount of Each Receipt this Period

500.00

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

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

2750.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

RALPH WILLIAMS

A.

Mailing Address 247 WEST MAIN ST. STE-H

City

HENDERSONVILLE

State

TN

Zip Code

37075

FEC ID number of contributing
federal political committee.

C

Name of Employer

HENDERSONVILLE HEALTH MART

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8486

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ROLAND WOOD

B.

Mailing Address 1197 WOOD LEE RD.

City

FOUR OAKS

State

NC

Zip Code

27524

FEC ID number of contributing
federal political committee.

C

Name of Employer

WOOD PHARMACY

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2014

Transaction ID : SA11AI.8489

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

HAROLD YELLIN

C.

Mailing Address P.O. BOX 9848

City

SAVANNAH

State

GA

Zip Code

31412

FEC ID number of contributing
federal political committee.

C

Name of Employer

HMED

Occupation

ATTORNEY/PARTNER

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2014

Transaction ID : SA11AI.8159

Amount of Each Receipt this Period

250.00

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
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

DOUGLAS YOCH

Mailing Address 13606 EVENING PRIMROSE DR.

City

DAVIDSON

State

NC

Zip Code

28036

FEC ID number of contributing
federal political committee.

C

Name of Employer

STANLEY SPECIALTY PHARMACY

Occupation

PHARMACIST/OWNER

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
06 27 2014

Transaction ID : SA11AI.8493

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JEANETTE YOUNG

Mailing Address 4640 STAFFORD AVE.

City

BETHLEHEM

State

PA

Zip Code

18020

FEC ID number of contributing
federal political committee.

C

Name of Employer

YOUNG'S PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☒ Primary

☐ General

☐ Other (specify)

Runoff

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
05 05 2014

Transaction ID : SA11AI.8161

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

RONG TIAN YU

Mailing Address 25433 PEMBROKE AVE.

City

GREAT NECK

State

NY

Zip Code

11020

FEC ID number of contributing
federal political committee.

C

Name of Employer

QUEENSBRIDGE PLAZA PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 24 2014

Transaction ID : SA11AI.8495

Amount of Each Receipt this Period

500.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

THOMAS ZIEGLER

A.

Mailing Address 21800 JARVIS SQUARE

City

ASHBORN

State

VA

Zip Code

20147

FEC ID number of contributing
federal political committee.

C

Name of Employer
MEDICAP PHARMACYOccupation
PHARMACIST/OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11AI.8167

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Dr. MICHAEL ZOLLER

B.

Mailing Address 100 McLAWS STREET

City

SAVANNAH

State

GA

Zip Code

31405

FEC ID number of contributing
federal political committee.

C

Name of Employer
ENT ASSOCIATESOccupation
PHYSICIAN

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 05 / 2014

Transaction ID : SA11AI.8169

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

DANIEL ZURAWSKI

C.

Mailing Address 10035 PRAIRIE KNOLL CT.

City

SAINT JOHN

State

IN

Zip Code

46373

FEC ID number of contributing
federal political committee.

C

Name of Employer
FAIRMEADOWS PHARMACYOccupation
PHARMACIST

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 25 / 2014

Transaction ID : SA11AI.8498

Amount of Each Receipt this Period

500.00

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

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

900.00

218503.32

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

Use separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

AANA PAC

Mailing Address 25 MASSACHUSETTS AVE.

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00173153

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 19 / 2014

Transaction ID : SA11C.7627

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. AGL RESOURCES INC. - PAC

Mailing Address P.O. BOX 4567

City

ATLANTA

State

GA

Zip Code

30302

FEC ID number of contributing
federal political committee.

C C00145037

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11C.8180

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1111 14TH STREET, NW
SUITE 1100

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00000729

Name of Employer

Occupation

Receipt For: 2014

☒ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 07 / 2014

Transaction ID : SA11C.7436

Amount of Each Receipt this Period

2500.00

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

8500.00

TOTAL 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

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<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)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN HEALTH CARE ASSOC.-PAC

A.

Mailing Address 1201 L STREET NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00006080

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2014

Transaction ID : SA11C.7673

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

AMERICAN HEALTH CARE ASSOC.-PAC

B.

Mailing Address 1201 L STREET NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00006080

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

2500.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2014

Transaction ID : SA11C.7675

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

AMERICAN LIBERTY AND NATION PAC (ALAN PAC)

C.

Mailing Address 438 EAST MAIN STREET
POST OFFICE BOX 7092

City

TUPELO

State

MS

Zip Code

38802

FEC ID number of contributing
federal political committee.

C C00495150

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

MM / DD / YYYY
06 / 05 / 2014

Transaction ID : SA11C.7676

Amount of Each Receipt this Period

1000.00

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

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

3500.00

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

Use separate schedule(s)
for each category of the
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<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)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

A.

Mailing Address 1505 PRINCE STREET
SUITE 300

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing
federal political committee.

C C00024968

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2014

Transaction ID : SA11C.7679

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

B.

Mailing Address 1111 NORTH FAIRFAX ST.

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing
federal political committee.

C C00012880

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2014

Transaction ID : SA11C.7431

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

C.

Mailing Address 1111 NORTH FAIRFAX ST.

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing
federal political committee.

C C00012880

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

8500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2014

Transaction ID : SA11C.8183

Amount of Each Receipt this Period

5000.00

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

7000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN SOCIETY OF ANESTHESIOLOGISTS

Mailing Address 520 N NORTHWEST HIGHWAY

City

PARK RIDGE

State

IL

Zip Code

60068

FEC ID number of contributing
federal political committee.**C** C70004684

Name of Employer

Occupation

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

9000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11C.8184

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (ABC PAC)Mailing Address 1300 MORRIS DRIVE
SUITE 100

City

CHESTERBROOK

State

PA

Zip Code

19355

FEC ID number of contributing
federal political committee.**C** C00400929

Name of Employer

Occupation

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

6000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2014

Transaction ID : SA11C.7678

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)Mailing Address 208 S. AKARD STREET
SUITE 2701

City

DALLAS

State

TX

Zip Code

75202

FEC ID number of contributing
federal political committee.**C** C00109017

Name of Employer

Occupation

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2014

Transaction ID : SA11C.7680

Amount of Each Receipt this Period

1000.00

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

7000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

COMMITTEE FOR/ADV OF SE COTTON (CASC) SOUTHERN COTTONGROWERS INC/SE COTTON GINNERS ASSN

A.Mailing Address 139 PROMINENCE COURT
STE. 110

City	State	Zip Code
DAWSONVILLE	GA	30534

FEC ID number of contributing
federal political committee.**C** C00300426

Name of Employer

Occupation

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2014

Transaction ID : SA11C.8227

Amount of Each Receipt this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT BILL BRUNSON

Mailing Address P.O.BOX 1995

City	State	Zip Code
BRUNSWICK	GA	31521

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

Name of Employer

Occupation

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	11	/	2014

Transaction ID : SA11C.7703

Amount of Each Receipt this Period

500.00

CONTAINS ONLY FEDERAL PERMISSABLE FUNDS

C.

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT BUTCH MILLER

Mailing Address 4734 ARAPAHOE TRAIL

City	State	Zip Code
GAINESVILLE	GA	30506

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

Name of Employer

Occupation

Receipt For: 2014

☐ Primary☐ General☒ Other (specify)

Runoff

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	05	/	2014

Transaction ID : SA11C.8515

Amount of Each Receipt this Period

1000.00

CONTAINS ONLY FEDERAL PERMISSABLE FUNDS

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

3000.00

TOTAL 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

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(check only one)

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<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)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT LORI BRADY

A.

Mailing Address 1418 CEDAR GROVE PLANTATION DR

City

SAVANNAH

State

GA

Zip Code

31419

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

150.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : SA11C.8518

Amount of Each Receipt this Period

150.00

CONTAINS ONLY FEDERAL PERMISSABLE FUNDS

Full Name (Last, First, Middle Initial)

CROSBY FOR SENATE

B.

Mailing Address P.O. BOX 1707

City

TIFTON

State

GA

Zip Code

31794

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

1800.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 25 / 2014

Transaction ID : SA11C.8507

Amount of Each Receipt this Period

300.00

CONTAINS ONLY FEDERAL PERMISSABLE FUNDS

Full Name (Last, First, Middle Initial)

CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

C.

Mailing Address 601 PENNSYLVANIA AVENUE, NW
SOUTH BUILDING, SUITE 600

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C C00007880

Name of Employer

Occupation

Receipt For: 2014

☒ Primary

☐ General

☐ Other (specify)

Runoff

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 19 / 2014

Transaction ID : SA11C.7510

Amount of Each Receipt this Period

5000.00

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

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

5450.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATIONMailing Address 601 PENNSYLVANIA AVENUE, NW
SOUTH BUILDING, SUITE 600

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing
federal political committee.**C** C00007880

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : SA11C.8514

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

Mailing Address 8400 WESTPARK DRIVE

City	State	Zip Code
MCLEAN	VA	22102

FEC ID number of contributing
federal political committee.**C** C00040998

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11C.7508

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

GEORGIA BANKERS ASSOCIATION

Mailing Address 50 HURT PLAZA

City	State	Zip Code
ATLANTA	GA	30303

FEC ID number of contributing
federal political committee.**C** C00092841

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		02		2014

Transaction ID : SA11C.8229

Amount of Each Receipt this Period

1000.00

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

11000.00

TOTAL 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

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(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

GEORGIA OILMEN'S ASSOCIATION INC PAC (GOAPAC)

A.

Mailing Address 1775 SPECTRUM DR SUITE 100

City

LAWRENCEVILLE

State

GA

Zip Code

30043

FEC ID number of contributing
federal political committee.

C C00319194

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 05 / 2014

Transaction ID : SA11C.7800

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE (IP-PAC)

B.

Mailing Address 1101 PENNSYLVANIA AVENUE NW
SUITE 200

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C C00034405

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 23 / 2014

Transaction ID : SA11C.7905

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

JACKSON FOR SENATE

C.

Mailing Address P.O. BOX 528

City

APPLING

State

GA

Zip Code

30802

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 25 / 2014

Transaction ID : SA11C.8509

Amount of Each Receipt this Period

500.00

CONTAINS ONLY FEDERAL PERMISSABLE FUNDS

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)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

KEYSTONE ALLIANCE POLITICAL ACTION COMMITTEE

A.

Mailing Address PO BOX 3883

City

PHILADELPHIA

State

PA

Zip Code

19146

FEC ID number of contributing
federal political committee.

C C00432096

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 19 / 2014

Transaction ID : SA11C.8034

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

B.

Mailing Address ONE POST STREET
34TH FLOOR

City

SAN FRANCISCO

State

CA

Zip Code

94104

FEC ID number of contributing
federal political committee.

C C00108035

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11C.7973

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF CHAIN DRUG STORES, INC. POLITICAL ACTION COMMITTEE

C.

Mailing Address 1776 WILSON BOULEVARD
SUITE 200

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing
federal political committee.

C C00022368

Name of Employer

Occupation

Receipt For: 2014

☒ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11C.7538

Amount of Each Receipt this Period

2500.00

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

8000.00

TOTAL 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)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

A.

Mailing Address 430 NORTH MICHIGAN AVENUE

City

CHICAGO

State

IL

Zip Code

60611

FEC ID number of contributing
federal political committee.

C C00030718

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 02 / 2014

Transaction ID : SA11C.8402

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

B.

Mailing Address 100 DAINGERFIELD ROAD

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00030809

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11C.8011

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

OMNICARE, INC. POLITICAL ACTION COMMITTEE

C.

Mailing Address 201 E. FOURTH STREET
900 OMNICARE CENTER

City

CINCINNATI

State

OH

Zip Code

45202

FEC ID number of contributing
federal political committee.

C C00392886

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 23 / 2014

Transaction ID : SA11C.8012

Amount of Each Receipt this Period

2000.00

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

12000.00

TOTAL 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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

PFIZER INC. PAC

A.

Mailing Address 235 EAST 42ND STREET

City

NEW YORK

State

NY

Zip Code

10017

FEC ID number of contributing
federal political committee.

C C00016683

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 02 / 2014

Transaction ID : SA11C.8388

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

PIONEER POLITICAL ACTION COMMITTEE

B.

Mailing Address 701 8TH STREET, NW
SUITE 500

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00325357

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 02 / 2014

Transaction ID : SA11C.8390

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

PROFESSIONAL COMPOUNDING CENTERS OF AMERICA POLITICAL ACTION COMMITTEE PCCA PAC

C.

Mailing Address 9901 SOUTH WILCREST DRIVE

City

HOUSTON

State

TX

Zip Code

77099

FEC ID number of contributing
federal political committee.

C C00558452

Name of Employer

Occupation

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11C.8392

Amount of Each Receipt this Period

2000.00

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

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

8000.00

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)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

RAYONIER INC. GOOD GOVERNMENT COMMITTEE

Mailing Address 1301 RIVERPLACE BLVD
SUITE 2300

City	State	Zip Code
JACKSONVILLE	FL	32207

FEC ID number of contributing
federal political committee.

C C00451757

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11C.8401

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

SUNTRUST BANK GOOD GOVERNMENT GROUP - GEORGIA

Mailing Address P.O. BOX 4418
MC 041

City	State	Zip Code
ATLANTA	GA	30303

FEC ID number of contributing
federal political committee.

C C00009639

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11C.8457

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

Mailing Address 1155 F STREET, NW
SUITE 400

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing
federal political committee.

C C00284885

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2014

Transaction ID : SA11C.8458

Amount of Each Receipt this Period

5000.00

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

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

7500.00

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)

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<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)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

UNITED HEALTH SERVICES PAC, INC.

A.

Mailing Address 211 EAST DOYLE STREET

City

TOCCOA

State

GA

Zip Code

30577

FEC ID number of contributing
federal political committee.

C C00400135

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

05 / **13** / **2014**

Transaction ID : SA11C.7491

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

WALGREEN CO PAC

B.

Mailing Address 104 WILMOT ROAD MS #1447

City

DEERFIELD

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C C00160770

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

05 / **13** / **2014**

Transaction ID : SA11C.7497

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

WENDY'S PAC

C.

Mailing Address ONE DAVE THOMAS BLVD.

City

DUBLIN

State

OH

Zip Code

43017

FEC ID number of contributing
federal political committee.

C C00369090

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

Election Cycle-to-Date

2500.00

Date of Receipt

07 / **02** / **2014**

Transaction ID : SA11C.8481

Amount of Each Receipt this Period

2500.00

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

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

6000.00

89450.00

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

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

FOR LINE NUMBER:

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(check only one)

<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 checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

EARL LEROY CARTER

A.

Mailing Address 406 PURPLE FINCH DR

City

POOLER

State

GA

Zip Code

31322

FEC ID number of contributing
federal political committee.

C H4GA01039

Name of Employer
CARTER'S PHARMACY

Occupation
PHARMACIST

Receipt For: 2014

☐ Primary

☐ General

☒ Other (specify)

Runoff

Election Cycle-to-Date

300000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2014

Transaction ID : SA13A.8522

Amount of Each Receipt this Period

50000.00

Full Name (Last, First, Middle Initial)

B.

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

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)

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).....

50000.00

50000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 138 OF 187

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ABERCORN OFFICE INVESTORS

Mailing Address P.O. BOX 14111

City	State	Zip Code
SAVANNAH	GA	31416

Purpose of Disbursement
RENT - SAVANNAH CAMPAIGN HEADQUARTERS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2014

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.7598**B. ABERCORN OFFICE INVESTORS**

Mailing Address P.O. BOX 14111

City	State	Zip Code
SAVANNAH	GA	31416

Purpose of Disbursement
RENT - SAVANNAH CAMPAIGN HEADQUARTERS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2014

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.7577**C. ABERCORN OFFICE INVESTORS**

Mailing Address P.O. BOX 14111

City	State	Zip Code
SAVANNAH	GA	31416

Purpose of Disbursement
RENT - SAVANNAH CAMPAIGN HEADQUARTERS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2014

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.8563**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4500.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 139 OF 187

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ADVERTISING SPECIALTY SERVICES

Mailing Address 402 E. MONTGOMERY CROSSROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

City	State	Zip Code
SAVANNAH	GA	31406

Purpose of Disbursement
T-SHIRTS

004

Amount of Each Disbursement this Period

237.54

Transaction ID : SB17.7564

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 type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State:

District:

Full Name (Last, First, Middle Initial)

B. ADVERTISING SPECIALTY SERVICES

Mailing Address 402 E. MONTGOMERY CROSSROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

City	State	Zip Code
SAVANNAH	GA	31406

Purpose of Disbursement
NAME BADGE

001

Amount of Each Disbursement this Period

13.38

Transaction ID : SB17.7843

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 type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State:

District:

Full Name (Last, First, Middle Initial)

C. ADVERTISING SPECIALTY SERVICES

Mailing Address 402 E. MONTGOMERY CROSSROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2014

City	State	Zip Code
SAVANNAH	GA	31406

Purpose of Disbursement
SHIRT

004

Amount of Each Disbursement this Period

37.45

Transaction ID : SB17.7845

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 type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State:

District:

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

288.37

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ALPHAGRAPHS

Mailing Address 7426 HODGSON MEMORIAL DR.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2014

City	State	Zip Code
SAVANNAH	GA	31406

Amount of Each Disbursement this Period

2086.85

Purpose of Disbursement
INVITATIONS

007

Transaction ID : SB17.7588

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 type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State:

District:

Full Name (Last, First, Middle Initial)

B. ALPHAGRAPHS

Mailing Address 7426 HODGSON MEMORIAL DR.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2014

City	State	Zip Code
SAVANNAH	GA	31406

Amount of Each Disbursement this Period

282.18

Purpose of Disbursement
FUNDRAISER NOTE CARDS/ENVELOPES

007

Transaction ID : SB17.7850

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 type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State:

District:

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address P.O. BOX 53852

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

City	State	Zip Code
PHOENIX	AZ	85072-3852

Amount of Each Disbursement this Period

198.63

Purpose of Disbursement
ONLINE MERCHANT FEE

001

Transaction ID : SB17.7607

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 type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State:

District:

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

2567.63

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 141 OF 187

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address P.O. BOX 53852

City	State	Zip Code
PHOENIX	AZ	85072-3852

Purpose of Disbursement
MERCHANT FEE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

7.95

Transaction ID : SB17.7611

B. AMERICAN EXPRESS

Mailing Address P.O. BOX 53852

City	State	Zip Code
PHOENIX	AZ	85072-3852

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

304.03

Transaction ID : SB17.8574

C. AMERICAN EXPRESS

Mailing Address P.O. BOX 53852

City	State	Zip Code
PHOENIX	AZ	85072-3852

Purpose of Disbursement
CREDIT CARD FEES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2014

Amount of Each Disbursement this Period

7.95

Transaction ID : SB17.8554

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

319.93

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 142 OF 187

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AQUASTAR RESTAURANT

Mailing Address 1 RESORT DRIVE

City	State	Zip Code
SAVANNAH	GA	31421

Purpose of Disbursement
IN-KIND - STAFF LUNCH

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 18 / 2014

Amount of Each Disbursement this Period

180.00

Transaction ID : SB17.8586

[MEMO ITEM]**B. AT&T**

Mailing Address P.O. BOX 537104

City	State	Zip Code
ATLANTA	GA	30353

Purpose of Disbursement
Internet

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 08 / 2014

Amount of Each Disbursement this Period

45.00

Transaction ID : SB17.7541

C. AT&T

Mailing Address P.O. BOX 537104

City	State	Zip Code
ATLANTA	GA	30353

Purpose of Disbursement
Telephone

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 16 / 2014

Amount of Each Disbursement this Period

25.03

Transaction ID : SB17.7554

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

70.03

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address P.O. BOX 537104

City	State	Zip Code
ATLANTA	GA	30353

Purpose of Disbursement
INTERNET

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

Amount of Each Disbursement this Period

45.00

Transaction ID : SB17.7590

B. AT&T

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 537104

City	State	Zip Code
ATLANTA	GA	30353

Purpose of Disbursement
TELEPHONE

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

Amount of Each Disbursement this Period

25.03

Transaction ID : SB17.7834

C. AT&T

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 537104

City	State	Zip Code
ATLANTA	GA	30353

Purpose of Disbursement
TELEPHONE

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2014

Amount of Each Disbursement this Period

51.67

Transaction ID : SB17.8552

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

121.70

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BETTER HOMETOWN BLACKSHEAR INC.

Mailing Address P.O. BOX 268

City	State	Zip Code
BLACKSHEAR	GA	31516

Purpose of Disbursement
SUMMER IN THE CITY FESTIVAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.7853

B. BLUEBERRY PLANTATION

Mailing Address 174 PLANTATION DRIVE

City	State	Zip Code
ALMA	GA	30510

Purpose of Disbursement
IN KIND- FUNDRAISER VENUE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2014

Amount of Each Disbursement this Period

1553.32

Transaction ID : SB17.8590

[MEMO ITEM]

C. BROWNSTEIN HYATT FARBER SCHRECK

Mailing Address 1350 I ST., NW

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
FUNDRAISING EVENT VENUE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2014

Amount of Each Disbursement this Period

391.00

Transaction ID : SB17.7847

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

891.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAINES HODGES & COMPANYMailing Address 200 EAST ST. JULIAN STREET
STE 603

City SAVANNAH State GA Zip Code 31401

Purpose of Disbursement
REIMBURSEMENT FOR DC AIRFARE: SEE MEMO

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) Runoff

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
06	25	2014

Amount of Each Disbursement this Period

3244.00

Transaction ID : SB17.7849

B. CAPITOL COAST CONSULTINGMailing Address 7031 HODGSON MEMORIAL DRIVE
SUITE C

City SAVANNAH State GA Zip Code 31406

Purpose of Disbursement
FUNDRAISING CONSULTANT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
05	15	2014

Amount of Each Disbursement this Period

2250.00

Transaction ID : SB17.8524

C. CAPITOL COAST CONSULTINGMailing Address 7031 HODGSON MEMORIAL DRIVE
SUITE C

City SAVANNAH State GA Zip Code 31406

Purpose of Disbursement
FUNDRAISING CONSULTANT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) Runoff

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
05	31	2014

Amount of Each Disbursement this Period

2250.00

Transaction ID : SB17.8566

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

7744.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 146 OF 187

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAPITOL COAST CONSULTINGMailing Address 7031 HODGSON MEMORIAL DRIVE
SUITE C

City SAVANNAH State GA Zip Code 31406

Purpose of Disbursement
FUNDRAISING CONSULTANT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2014

Amount of Each Disbursement this Period

2250.00

Transaction ID : SB17.8538

B. CAPITOL COAST CONSULTINGMailing Address 7031 HODGSON MEMORIAL DRIVE
SUITE C

City SAVANNAH State GA Zip Code 31406

Purpose of Disbursement
FUNDRAISING CONSULTANT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

Amount of Each Disbursement this Period

2250.00

Transaction ID : SB17.8558

C. CVS PHARMACY

Mailing Address 712 STEPHENSON AVENUE

City SAVANNAH State GA Zip Code 31406

Purpose of Disbursement
REFRESHMENTS FOR OFFICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2014

Amount of Each Disbursement this Period

15.45

Transaction ID : SB17.8622

[MEMO ITEM]

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

4500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 147 OF 187

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FLASH FOODS

Mailing Address 1080 HWY 80 EAST

City	State	Zip Code
POOLER	GA	31322

Purpose of Disbursement
FUEL

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2014

Amount of Each Disbursement this Period

73.13

Transaction ID : SB17.7814

B. FLASH FOODS

Mailing Address 1080 HWY 80 EAST

City	State	Zip Code
POOLER	GA	31322

Purpose of Disbursement
FUEL

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		13		2014

Amount of Each Disbursement this Period

57.15

Transaction ID : SB17.7815

C. FLASH FOODS

Mailing Address 1080 HWY 80 EAST

City	State	Zip Code
POOLER	GA	31322

Purpose of Disbursement
FUEL

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2014

Amount of Each Disbursement this Period

67.64

Transaction ID : SB17.7816

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

197.92

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 148 OF 187

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FLASH FOODS

Mailing Address 1080 HWY 80 EAST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

City	State	Zip Code
POOLER	GA	31322

Amount of Each Disbursement this Period

58.25

Purpose of Disbursement
FUEL

002

Transaction ID : SB17.7817

Candidate Name

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)	

State:

District:

Full Name (Last, First, Middle Initial)

B. FLASH FOODS

Mailing Address 1080 HWY 80 EAST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		21		2014

City	State	Zip Code
POOLER	GA	31322

Amount of Each Disbursement this Period

71.88

Purpose of Disbursement
FUEL

002

Transaction ID : SB17.7818

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 type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) Runoff	

State:

District:

Full Name (Last, First, Middle Initial)

C. FLASH FOODS

Mailing Address 1080 HWY 80 EAST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

City	State	Zip Code
POOLER	GA	31322

Amount of Each Disbursement this Period

42.55

Purpose of Disbursement
FUEL

002

Transaction ID : SB17.7819

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 type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) Runoff	

State:

District:

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

172.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 149 OF 187

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FLASH FOODS

Mailing Address 1080 HWY 80 EAST

City	State	Zip Code
POOLER	GA	31322

Purpose of Disbursement
FUEL

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

74.65

Transaction ID : SB17.7820

B. FLASH FOODS

Mailing Address 1080 HWY 80 EAST

City	State	Zip Code
POOLER	GA	31322

Purpose of Disbursement
FUEL

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2014

Amount of Each Disbursement this Period

41.65

Transaction ID : SB17.7822

C. FLASH FOODS

Mailing Address 1080 HWY 80 EAST

City	State	Zip Code
POOLER	GA	31322

Purpose of Disbursement
FUEL

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2014

Amount of Each Disbursement this Period

45.40

Transaction ID : SB17.7824

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

161.70

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FLASH FOODS

Mailing Address 1080 HWY 80 EAST

City	State	Zip Code
POOLER	GA	31322

Purpose of Disbursement
FUEL

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

Amount of Each Disbursement this Period

57.45

Transaction ID : SB17.7827

B. FLASH FOODS

Mailing Address 1080 HWY 80 EAST

City	State	Zip Code
POOLER	GA	31322

Purpose of Disbursement
FUEL

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

Amount of Each Disbursement this Period

49.55

Transaction ID : SB17.7828

C. FLASH FOODS

Mailing Address 1080 HWY 80 EAST

City	State	Zip Code
POOLER	GA	31322

Purpose of Disbursement
FUEL

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

Amount of Each Disbursement this Period

74.69

Transaction ID : SB17.7829

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

181.69

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 151 OF 187

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FLASH FOODS

Mailing Address 1080 HWY 80 EAST

City	State	Zip Code
POOLER	GA	31322

Purpose of Disbursement
FUEL

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2014

Amount of Each Disbursement this Period

73.87

Transaction ID : SB17.7831

B. FLASH FOODS

Mailing Address 1080 HWY 80 EAST

City	State	Zip Code
POOLER	GA	31322

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

Amount of Each Disbursement this Period

51.75

Transaction ID : SB17.7832

C. FLASH FOODS # 254

Mailing Address 160 MILLENNIUM BLVD

City	State	Zip Code
BRUNSWICK	GA	31525

Purpose of Disbursement
FUEL

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

Amount of Each Disbursement this Period

74.48

Transaction ID : SB17.7823

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

200.10

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FLASH FOODS # 254

Mailing Address 160 MILLENNIUM BLVD

City	State	Zip Code
BRUNSWICK	GA	31525

Purpose of Disbursement
FUEL

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

Amount of Each Disbursement this Period

62.11

Transaction ID : SB17.7825

B. FLASH FOODS # 254

Mailing Address 160 MILLENNIUM BLVD

City	State	Zip Code
BRUNSWICK	GA	31525

Purpose of Disbursement
FUEL

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

Amount of Each Disbursement this Period

47.60

Transaction ID : SB17.7826

C. FLASH FOODS # 254

Mailing Address 160 MILLENNIUM BLVD

City	State	Zip Code
BRUNSWICK	GA	31525

Purpose of Disbursement
FUEL

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2014

Amount of Each Disbursement this Period

70.92

Transaction ID : SB17.8542

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

180.63

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 153 OF 187

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PHILLIP FORDHAM

Mailing Address 209 WEST GORDON LANE

City	State	Zip Code
SAVANNAH	GA	31401

Purpose of Disbursement
PAYROLL EXPENSE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2014

Amount of Each Disbursement this Period

756.12

Transaction ID : SB17.7615

B. PHILLIP FORDHAM

Mailing Address 209 WEST GORDON LANE

City	State	Zip Code
SAVANNAH	GA	31401

Purpose of Disbursement
PAYROLL EXPENSE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

Amount of Each Disbursement this Period

756.12

Transaction ID : SB17.7618

C. PHILLIP FORDHAM

Mailing Address 209 WEST GORDON LANE

City	State	Zip Code
SAVANNAH	GA	31401

Purpose of Disbursement
PAYROLL EXPENSE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

Amount of Each Disbursement this Period

756.12

Transaction ID : SB17.7621

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

2268.36

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PHILLIP FORDHAM

Mailing Address 209 WEST GORDON LANE

City	State	Zip Code
SAVANNAH	GA	31401

Purpose of Disbursement
PAYROLL EXPENSE

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 19 / 2014

Amount of Each Disbursement this Period

756.12

Transaction ID : SB17.7623

B. PHILLIP FORDHAM

Mailing Address 75 JOHN WESLEY DOBBS AVE

City	State	Zip Code
ATLANTA	GA	30303

Purpose of Disbursement
REIMBURSEMENT FOR MILEAGE AND EXPENSES: SEE MEMO

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 19 / 2014

Amount of Each Disbursement this Period

139.03

Transaction ID : SB17.8571

C. GEORGIA DEPARTMENT OF REVENUE

Mailing Address P.O. BOX 740234

City	State	Zip Code
ATLANTA	GA	30374

Purpose of Disbursement
PAYROLL TAX DEPOSIT

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 13 / 2014

Amount of Each Disbursement this Period

315.71

Transaction ID : SB17.7609

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

1210.86

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GEORGIA DEPARTMENT OF REVENUE

Mailing Address P.O. BOX 740234

City	State	Zip Code
ATLANTA	GA	30374

Purpose of Disbursement
PAYROLL TAX DEPOSIT

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06	/	13	/	2014

Amount of Each Disbursement this Period

316.04

Transaction ID : SB17.7612

B. GLOBAL PAYMailing Address 255 GOLD RIVERS CT.
FL 3

City	State	Zip Code
BASALT	CO	81621

Purpose of Disbursement
MERCHANT FEE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05	/	02	/	2014

Amount of Each Disbursement this Period

254.05

Transaction ID : SB17.7608

C. GLOBAL PAYMailing Address 255 GOLD RIVERS CT.
FL 3

City	State	Zip Code
BASALT	CO	81621

Purpose of Disbursement
ONLINE MERCHANT FEES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06	/	03	/	2014

Amount of Each Disbursement this Period

841.08

Transaction ID : SB17.8576

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

1411.17

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. JUDI HARRISON

Mailing Address 813 HAMILTON LANDING DR.

City	State	Zip Code
ST. SIMONS ISLAND	GA	31522

Purpose of Disbursement
RENT-BRUNSWICK HQ

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2014

Amount of Each Disbursement this Period

550.00

Transaction ID : SB17.7575

B. JUDI HARRISON

Mailing Address 813 HAMILTON LANDING DR.

City	State	Zip Code
ST. SIMONS ISLAND	GA	31522

Purpose of Disbursement
RENT - BRUNSWICK HQ

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2014

Amount of Each Disbursement this Period

550.00

Transaction ID : SB17.8564

C. LEE HUGHES

Mailing Address 2 ELIZABETH CIR.

City	State	Zip Code
SAVANNAH	GA	31406

Purpose of Disbursement
REIMBURSEMENT FOR CAMPAIGN EXPENSES: SEE MEMO

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

292.61

Transaction ID : SB17.7565

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

1392.61

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 157 OF 187

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HUNTER MACLEAN

Mailing Address P.O. BOX 9848

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

City	State	Zip Code
SAVANNAH	GA	31412

Purpose of Disbursement
RESEARCH

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Amount of Each Disbursement this Period

350.00

Transaction ID : SB17.7581

B. KATRINA BARROW

Mailing Address 507 ST. JOHN'S ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

City	State	Zip Code
HINESVILLE	GA	31313

Purpose of Disbursement
RECEPTION INVITATIONS

007

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17.7844

C. KATRINA BARROW

Mailing Address 507 ST. JOHN'S ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

City	State	Zip Code
HINESVILLE	GA	31313

Purpose of Disbursement
INVITATIONS

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.8561

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

675.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. KENNICKELL PRINTING GROUP

Mailing Address 1700 E. PRESIDENT ST.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

City	State	Zip Code
SAVANNAH	GA	31404

Purpose of Disbursement
STATIONARY

006

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Amount of Each Disbursement this Period

332.77

Transaction ID : SB17.7592

B. KROGER

Mailing Address 318 MALL BLVD.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

City	State	Zip Code
SAVANNAH	GA	31406

Purpose of Disbursement
ELECTION NIGHT REFRESHMENTS

007

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

72.71

Transaction ID : SB17.8619

[MEMO ITEM]

C. KROGER

Mailing Address 318 MALL BLVD.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

City	State	Zip Code
SAVANNAH	GA	31406

Purpose of Disbursement
FOOD FOR CAMPAIGN EVENT

007

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Amount of Each Disbursement this Period

47.35

Transaction ID : SB17.8606

[MEMO ITEM]

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

332.77

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LANDMARK COMMUNICATIONSMailing Address 11300 ATLANTIS PLACE
SUITE F

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement
CONSULTING & SOCIAL MEDIA FEE

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2014

Amount of Each Disbursement this Period

13711.00

Transaction ID : SB17.7599

B. LANDMARK COMMUNICATIONSMailing Address 11300 ATLANTIS PLACE
SUITE F

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement
MAILINGS, POLLING, AND SUPPLIES

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2014

Amount of Each Disbursement this Period

23760.00

Transaction ID : SB17.7553

C. LANDMARK COMMUNICATIONSMailing Address 11300 ATLANTIS PLACE
SUITE F

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement
ROBO CALLS

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

Amount of Each Disbursement this Period

2660.80

Transaction ID : SB17.7561

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

40131.80

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LANDMARK COMMUNICATIONSMailing Address 11300 ATLANTIS PLACE
SUITE F

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement
MAILINGS AND POLLING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		21		2014

Amount of Each Disbursement this Period

20057.00

Transaction ID : SB17.7604

B. LANDMARK COMMUNICATIONSMailing Address 11300 ATLANTIS PLACE
SUITE F

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement
CONSULTING & SOCIAL MEDIA FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

Amount of Each Disbursement this Period

2697.00

Transaction ID : SB17.7580

C. LANDMARK COMMUNICATIONSMailing Address 11300 ATLANTIS PLACE
SUITE F

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement
LIST PURCHASE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

Amount of Each Disbursement this Period

305.00

Transaction ID : SB17.7582

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

23059.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LANDMARK COMMUNICATIONSMailing Address 11300 ATLANTIS PLACE
SUITE F

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement
CARDS, GRAPHICS, & VOTER LIST

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) Runoff

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

Amount of Each Disbursement this Period

2040.00

Transaction ID : SB17.7833

B. LANDMARK COMMUNICATIONSMailing Address 11300 ATLANTIS PLACE
SUITE F

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement
ENDORSE TV AD & POLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) Runoff

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

Amount of Each Disbursement this Period

1450.00

Transaction ID : SB17.7851

C. LARGO BEVERAGE SUPERSTORE

Mailing Address 8489 WATERS AVENUES

City SAVANNAH State GA Zip Code 31406

Purpose of Disbursement
ELECTION NIGHT REFRESHMENTS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

Amount of Each Disbursement this Period

105.49

Transaction ID : SB17.8620

[MEMO ITEM]

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

3490.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MACSATA KORNEGAY GROUP

Mailing Address P.O. BOX 15275

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
RETAINER ON FUNDRAISING CONSULTANT

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.7578

B. McLaughlin & Assoc.

Mailing Address 566 South Route 303

City	State	Zip Code
Blauvelt	NY	10913

Purpose of Disbursement
POLL EXPENSE

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2014

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.7546

c. McLaughlin & Assoc.

Mailing Address 566 South Route 303

City	State	Zip Code
Blauvelt	NY	10913

Purpose of Disbursement
POLL EXPENSE

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

Amount of Each Disbursement this Period

10500.00

Transaction ID : SB17.7585

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

23000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. EDWARD MURRAY Jr.

Mailing Address 133 CANDLEWOOD DR.

City	State	Zip Code
ALMA	GA	31510

Purpose of Disbursement
In-kind - FUNDRAISER VENUE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2014

Amount of Each Disbursement this Period

1553.32

Transaction ID : SB17.8597

B. EMMIT NOLAN

Mailing Address 724 STONEWALL ST.

City	State	Zip Code
BURNSWICK	GA	31520

Purpose of Disbursement
CONSULTANT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.7839

C. OFFICE DEPOT

Mailing Address 8108 ABERCORN STREET

City	State	Zip Code
SAVANNAH	GA	31406

Purpose of Disbursement
CAMPAIGN SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2014

Amount of Each Disbursement this Period

22.10

Transaction ID : SB17.8598

[MEMO ITEM]

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

2053.32

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. OFFICE DEPOT

Mailing Address 8108 ABERCORN STREET

City	State	Zip Code
SAVANNAH	GA	31406

Purpose of Disbursement
CAMPAIGN SUPPLIES

006

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2014

Amount of Each Disbursement this Period

391.58

Transaction ID : SB17.7589

B. OFFICE MAX

Mailing Address 25 JANET DRIVE

City	State	Zip Code
SAVANNAH	GA	31405

Purpose of Disbursement
OFFICE SUPPLIES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2014

Amount of Each Disbursement this Period

19.57

Transaction ID : SB17.8615

[MEMO ITEM]

C. OFFICE MAX

Mailing Address 25 JANET DRIVE

City	State	Zip Code
SAVANNAH	GA	31405

Purpose of Disbursement
CAMPAIGN SUPPLIES

007

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

14.97

Transaction ID : SB17.8599

[MEMO ITEM]

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

391.58

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. OFFICE MAX

Mailing Address 25 JANET DRIVE

City	State	Zip Code
SAVANNAH	GA	31405

Purpose of Disbursement
OFFICE SUPPLIES

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

Amount of Each Disbursement this Period

14.97

Transaction ID : SB17.8607

[MEMO ITEM]**B. OFFICE MAX**

Mailing Address 25 JANET DRIVE

City	State	Zip Code
SAVANNAH	GA	31405

Purpose of Disbursement
LABELS

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

Amount of Each Disbursement this Period

76.47

Transaction ID : SB17.8609

[MEMO ITEM]**C. PAPER CLIP**

Mailing Address P.O. BOX 18272

City	State	Zip Code
GARDEN CITY	GA	31418

Purpose of Disbursement
CAMPAIGN SUPPLIES

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2014

Amount of Each Disbursement this Period

337.05

Transaction ID : SB17.7551

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

337.05

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PARKERS

Mailing Address 8724 FORD AVENUE

Date of Disbursement

M M	D D	Y Y Y Y
05	23	2014

City	State	Zip Code
RICHMOND HILL	GA	31324

Amount of Each Disbursement this Period

66.54

Purpose of Disbursement
FUEL

002

Transaction ID : SB17.7813

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Full Name (Last, First, Middle Initial)

B. PUBLIX

Mailing Address 5500 ABERCORN STREET

Date of Disbursement

M M	D D	Y Y Y Y
05	27	2014

City	State	Zip Code
SAVANNAH	GA	31406

Amount of Each Disbursement this Period

9.08

Purpose of Disbursement
CAMPAIGN EVENT SUPPLIES

007

Transaction ID : SB17.8602

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Full Name (Last, First, Middle Initial)

C. PUBLIX

Mailing Address 5500 ABERCORN STREET

Date of Disbursement

M M	D D	Y Y Y Y
06	16	2014

City	State	Zip Code
SAVANNAH	GA	31406

Amount of Each Disbursement this Period

53.57

Purpose of Disbursement
OFFICE SUPPLIES

001

Transaction ID : SB17.8608

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

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

66.54

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SAM'S CLUB

Mailing Address 15 MILL CREEK CIRCLE

City	State	Zip Code
POOLER	GA	31322

Purpose of Disbursement
REFRESHMENTS & SUPPLIES FOR CAMPAIGN EVENT

007

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

140.49

Transaction ID : SB17.8614

[MEMO ITEM]**B. JUD SEYMOUR**

Mailing Address 164 FISHHALL LANE

City	State	Zip Code
BRUNSWICK	GA	31523

Purpose of Disbursement
PAYROLL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2014

Amount of Each Disbursement this Period

1031.25

Transaction ID : SB17.7614

C. JUD SEYMOUR

Mailing Address 164 FISHHALL LANE

City	State	Zip Code
BRUNSWICK	GA	31523

Purpose of Disbursement
REIMBURSEMENT FOR MILEAGE AND EXPENSES: SEE MEMO

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2014

Amount of Each Disbursement this Period

185.76

Transaction ID : SB17.8523

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

1217.01

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. JUD SEYMOUR

Mailing Address 164 FISHHALL LANE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

City	State	Zip Code
BRUNSWICK	GA	31523

Amount of Each Disbursement this Period

1031.23

Purpose of Disbursement
PAYROLL EXPENSE

001

Transaction ID : SB17.7617

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 type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State:

District:

Full Name (Last, First, Middle Initial)

B. JUD SEYMOUR

Mailing Address 164 FISHHALL LANE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

City	State	Zip Code
BRUNSWICK	GA	31523

Amount of Each Disbursement this Period

878.04

Purpose of Disbursement
REIMBURSEMENT FOR MILEAGE AND EXPENSES

001

Transaction ID : SB17.8530

Candidate Name

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)	

State:

District:

Full Name (Last, First, Middle Initial)

C. JUD SEYMOUR

Mailing Address 164 FISHHALL LANE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

City	State	Zip Code
BRUNSWICK	GA	31523

Amount of Each Disbursement this Period

1031.23

Purpose of Disbursement
PAYROLL EXPENSE

001

Transaction ID : SB17.7620

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 type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State:

District:

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

2940.50

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. JUD SEYMOUR

Mailing Address 164 FISHHALL LANE

City	State	Zip Code
BRUNSWICK	GA	31523

Purpose of Disbursement
REIMBURSEMENT FOR MILEAGE AND EXPENSES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

Amount of Each Disbursement this Period

80.60

Transaction ID : SB17.8572

B. JUD SEYMOUR

Mailing Address 164 FISHHALL LANE

City	State	Zip Code
BRUNSWICK	GA	31523

Purpose of Disbursement
PAYROLL EXPENSE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

Amount of Each Disbursement this Period

1031.24

Transaction ID : SB17.7624

C. JUD SEYMOUR

Mailing Address 164 FISHHALL LANE

City	State	Zip Code
BRUNSWICK	GA	31523

Purpose of Disbursement
REIMBURSEMENT FOR MILEAGE AND EXPENSES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

Amount of Each Disbursement this Period

838.14

Transaction ID : SB17.8573

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

1949.98

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SOCO STRATEGIES

Mailing Address 349 SUMMER PALACE WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

City	State	Zip Code
LAS VEGAS	NV	89144

Amount of Each Disbursement this Period

1400.50

Purpose of Disbursement
PHONE SYSTEM

001

Transaction ID : SB17.7591

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Full Name (Last, First, Middle Initial)

B. SPIRIT OF LIBERTY

Mailing Address P.O. BOX 434

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

City	State	Zip Code
PATTERSON	GA	31557

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
FESTIVAL COMMITTEE

012

Transaction ID : SB17.7835

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Full Name (Last, First, Middle Initial)

C. STRATEGIC MEDIA PLACEMENT INC.

Mailing Address 41 SOUTH HIGH STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2014

City	State	Zip Code
COLUMBUS	OH	43215

Amount of Each Disbursement this Period

85243.60

Purpose of Disbursement
DISTRICT-WIDE MEDIA/ADVERTISING

004

Transaction ID : SB17.7600

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

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

86894.10

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. STRATEGIC MEDIA PLACEMENT INC.

Mailing Address 41 SOUTH HIGH STREET

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
DISTRICT-WIDE MEDIA/ADVERTISING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) Runoff

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 14 / 2014

Amount of Each Disbursement this Period

19400.00

Transaction ID : SB17.7602

B. STRATEGIC MEDIA PLACEMENT INC.

Mailing Address 41 SOUTH HIGH STREET

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
DISTRICT-WIDE TV/RADIO ADVERTISING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) Runoff

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 12 / 2014

Amount of Each Disbursement this Period

104663.00

Transaction ID : SB17.7605

C. STRATEGIC MEDIA PLACEMENT INC.

Mailing Address 41 SOUTH HIGH STREET

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
DISTRICT WIDE RADIO/CABLE & WEB

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) Runoff

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 26 / 2014

Amount of Each Disbursement this Period

19458.20

Transaction ID : SB17.7852

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

143521.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. STRATEGY GROUP COMPANY

Mailing Address 7669 STAGERS LOOP

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2014

City	State	Zip Code
DELAWARE	OH	43015

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
PRODUCTION: TV/RADIO

004

Transaction ID : SB17.7601

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 type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State:

District:

Full Name (Last, First, Middle Initial)

B. STRATEGY GROUP COMPANY

Mailing Address 7669 STAGERS LOOP

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		14		2014

City	State	Zip Code
DELAWARE	OH	43015

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
PRODUCTION: TV/RADIO

004

Transaction ID : SB17.7603

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 type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State:

District:

Full Name (Last, First, Middle Initial)

C. STRATEGY GROUP COMPANY

Mailing Address 7669 STAGERS LOOP

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2014

City	State	Zip Code
DELAWARE	OH	43015

Amount of Each Disbursement this Period

7200.00

Purpose of Disbursement
PRODUCTION: TV/RADIO

004

Transaction ID : SB17.7846

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 type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Runoff

State:

District:

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

13200.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. TARGET

Mailing Address 1907 E VICTORY DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2014

City	State	Zip Code
SAVANNAH	GA	31404

Amount of Each Disbursement this Period

26.76

Purpose of Disbursement
OFFICE SUPPLIES

001

Transaction ID : SB17.8618

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. THE COASTAL BANK

Mailing Address PO BOX 9585

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

City	State	Zip Code
SAVANNAH	GA	31412-9585

Amount of Each Disbursement this Period

85.67

Purpose of Disbursement
BANK FEES

001

Transaction ID : SB17.8532

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State: District:

Full Name (Last, First, Middle Initial)

C. THE COASTAL BANK

Mailing Address PO BOX 9585

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

City	State	Zip Code
SAVANNAH	GA	31412-9585

Amount of Each Disbursement this Period

85.64

Purpose of Disbursement
BANK FEES

001

Transaction ID : SB17.8562

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State: District:

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

171.31

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. TOYS R US

Mailing Address 7400 ABERCORN STREET

City	State	Zip Code
SAVANNAH	GA	31406

Purpose of Disbursement
SUPPLIES FOR PARADE

007

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

110.14

Transaction ID : SB17.8613

[MEMO ITEM]**B. TURNER & ASSOCIATES**

Mailing Address P.O. BOX 40

City	State	Zip Code
BRUNSWICK	GA	31521

Purpose of Disbursement
Insurance on HQ

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.7562

C. UNCLE MADDIO'S PIZZA JOINT

Mailing Address 7805 ABERCORN ST

City	State	Zip Code
SAVANNAH	GA	31406

Purpose of Disbursement
FUNDRAISER MEAL

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

Amount of Each Disbursement this Period

27.23

Transaction ID : SB17.8526

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

527.23

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNITED STATES TREASURY

Mailing Address P.O. BOX 105083

City	State	Zip Code
ATLANTA	GA	30348

Purpose of Disbursement
PAYROLL TAX DEPOSIT

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		13		2014

Amount of Each Disbursement this Period

1795.16

Transaction ID : SB17.7610

B. UNITED STATES TREASURY

Mailing Address P.O. BOX 105083

City	State	Zip Code
ATLANTA	GA	30348

Purpose of Disbursement
PAYROLL TAX DEPOSIT

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

1796.96

Transaction ID : SB17.7613

C. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD.

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement
AIRFARE TO D.C.

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2014

Amount of Each Disbursement this Period

3244.00

Transaction ID : SB17.8610

[MEMO ITEM]

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

3592.12

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. USPS - OGLETHORPE STATION

Mailing Address 1348 EISENHOWER DRIVE

City	State	Zip Code
SAVANNAH	GA	31406

Purpose of Disbursement
POSTAGE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2014

Amount of Each Disbursement this Period

22.84

Transaction ID : SB17.8617

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SARAH J VARDIAN

Mailing Address 1106 DRAYTON

City	State	Zip Code
SAVANNAH	GA	31401

Purpose of Disbursement
REIMBURSEMENT FOR OFFICE SUPPLIES: SEE MEMO

006

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2014

Amount of Each Disbursement this Period

69.17

Transaction ID : SB17.7549

Full Name (Last, First, Middle Initial)

C. SARAH J VARDIAN

Mailing Address 1106 DRAYTON

City	State	Zip Code
SAVANNAH	GA	31401

Purpose of Disbursement
PAYROLL EXPENSE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2014

Amount of Each Disbursement this Period

670.50

Transaction ID : SB17.7616

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

739.67

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SARAH J VARDIAN

Mailing Address 1106 DRAYTON

City	State	Zip Code
SAVANNAH	GA	31401

Purpose of Disbursement
REIMBURSEMENT FOR SUPPLIES

006

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2014

Amount of Each Disbursement this Period

22.10

Transaction ID : SB17.7550

B. SARAH J VARDIAN

Mailing Address 1106 DRAYTON

City	State	Zip Code
SAVANNAH	GA	31401

Purpose of Disbursement
PAYROLL EXPENSE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

Amount of Each Disbursement this Period

670.50

Transaction ID : SB17.7619

C. SARAH J VARDIAN

Mailing Address 1106 DRAYTON

City	State	Zip Code
SAVANNAH	GA	31401

Purpose of Disbursement
REIMBURSEMENT FOR CAMPAIGN SUPPLIES: SEE MEMO

007

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

95.73

Transaction ID : SB17.7567

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

788.33

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SARAH J VARDIAN

Mailing Address 1106 DRAYTON

City	State	Zip Code
SAVANNAH	GA	31401

Purpose of Disbursement
PAYROLL EXPENSE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

Amount of Each Disbursement this Period

670.50

Transaction ID : SB17.7622

B. SARAH J VARDIAN

Mailing Address 1106 DRAYTON

City	State	Zip Code
SAVANNAH	GA	31401

Purpose of Disbursement
REIMBURSEMENT FOR SUPPLIES: SEE MEMO

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

Amount of Each Disbursement this Period

68.54

Transaction ID : SB17.7594

C. SARAH J VARDIAN

Mailing Address 1106 DRAYTON

City	State	Zip Code
SAVANNAH	GA	31401

Purpose of Disbursement
REIMBURSEMENT FOR SUPPLIES: SEE MEMO

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

Amount of Each Disbursement this Period

76.47

Transaction ID : SB17.7595

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

815.51

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 179 OF 187

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

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NAME OF COMMITTEE (In Full)

BUDDY CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SARAH J VARDIAN

Mailing Address 1106 DRAYTON

City	State	Zip Code
SAVANNAH	GA	31401

Purpose of Disbursement
PAYROLL EXPENSE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

Amount of Each Disbursement this Period

670.50

Transaction ID : SB17.7625

B. WALMART

Mailing Address 1955 E MONTGOMERY XRD

City	State	Zip Code
SAVANNAH	GA	31406

Purpose of Disbursement
CAMPAIGN EVENT SUPPLIES

006

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

24.33

Transaction ID : SB17.8605

[MEMO ITEM]

C. WALMART

Mailing Address 1955 E MONTGOMERY XRD

City	State	Zip Code
SAVANNAH	GA	31406

Purpose of Disbursement
CAMPAIGN EVENT SUPPLIES

007

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Runoff

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

38.80

Transaction ID : SB17.8611

[MEMO ITEM]

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

670.50

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SCHEDULE C (FEC Form 3)
LOANS

PAGE 182 OF 187

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4216

BUDDY CARTER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

EARL LEROY CARTER

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

406 PURPLE FINCH DR

City

State

ZIP Code

POOLER

GA

31322

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
04 / 30 / 2013

Date Due

M M / D D / Y Y Y Y
12/1/2015

Interest Rate

0.00 % (apr)

Secured:

☐ 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

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4765

BUDDY CARTER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

EARL LEROY CARTER

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

406 PURPLE FINCH DR

City

State

ZIP Code

POOLER

GA

31322

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 28 / 2013

Date Due

M M / D D / Y Y Y Y
12/1/2015

Interest Rate

0.00

% (apr)

Secured:

☐ 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

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Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5285

BUDDY CARTER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

EARL LEROY CARTER

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

406 PURPLE FINCH DR

City

State

ZIP Code

POOLER

GA

31322

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 30 / 2013

Date Due

M M / D D / Y Y Y Y
/ / 12/1/2015

Interest Rate

0.00 % (apr)

Secured:

☐ 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

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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.6214

BUDDY CARTER FOR CONGRESS**LOAN SOURCE** Full Name (Last, First, Middle Initial)**[PERSONAL FUNDS]**

Election: 2014

EARL LEROY CARTER☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

406 PURPLE FINCH DR

City

State

ZIP Code

POOLER

GA

31322

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
12 / 31 / 2013

Date Due

M M / D D / Y Y Y Y
12/01/2015

Interest Rate

0.00

% (apr)

Secured:

☐ 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

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NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.6957

BUDDY CARTER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

EARL LEROY CARTER

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

406 PURPLE FINCH DR

City

State

ZIP Code

POOLER

GA

31322

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
03 / 31 / 2014

Date Due

M M / D D / Y Y Y Y
12/01/2015

Interest Rate

0.00

% (apr)

Secured:

☐ 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

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☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.8522

BUDDY CARTER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

EARL LEROY CARTER

☐ Primary☐ General☒ Other (specify) ▼

Runoff

Mailing Address

406 PURPLE FINCH DR

City

State

ZIP Code

POOLER

GA

31322

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 02 / 2014

Date Due

M M / D D / Y Y Y Y
12/01/2015

Interest Rate

0.00 % (apr)

Secured:

☐ 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)..... ►

300000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.