

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Friends of Jeff Chapman

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	15780	149332.11
(b) Total Contribution Refunds (from Line 20(d))	300	8300
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	15480	141032.11
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	49521.94	103690.97
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	49521.94	103690.97
8. Cash on Hand at Close of Reporting Period (from Line 27).....	37341.14	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	29527.17	

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)

Write or Type Committee Name

Friends of Jeff Chapman

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

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).....	12850	132050
(ii) Unitemized.....	2930	16947.11
(iii) TOTAL of contributions from individuals ▶	15780	148997.11
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	300
(d) The Candidate.....	0	35
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	15780	149332.11
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0	0
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	15780	149332.11

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	49521.94	103690.97
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	300	8300
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	300	8300
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	49821.94	111990.97

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	71383.08
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	15780
25. SUBTOTAL (add Line 23 and Line 24).....	87163.08
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	49821.94
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	37341.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

A. Full Name (Last, First, Middle Initial)
Ellis Black Farm

Mailing Address 5900 Jumping Gully Road

City Valdosta State GA Zip Code 31601-2317

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 28 / 2014

Transaction ID : A-CF420

Amount of Each Receipt this Period
250

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

B. Full Name (Last, First, Middle Initial)
Mr. Ellis Black

Mailing Address 5900 Jumping Gully Road

City Valdosta State GA Zip Code 31601-2317

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

Name of Employer Occupation
Ellis Black Farm Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 28 / 2014

Transaction ID : A-PIP18

Amount of Each Receipt this Period
250

[MEMO ITEM]
 Partnership Itemization Memo

C. Full Name (Last, First, Middle Initial)
J. Burton Cousar

Mailing Address 130 Harrison Pointe

City Saint Simons Island State GA Zip Code 31522-1793

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : A-CF445

Amount of Each Receipt this Period
100

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

A. Full Name (Last, First, Middle Initial)
Linda Daniels

Mailing Address 9309 Ga Highway 99

City Darien State GA Zip Code 31305-3405

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : A-CF444

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. Geoff Duncan

Mailing Address 2155 Cascading Creek Court

City Cumming State GA Zip Code 30041-7697

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

Name of Employer Self-Employed Occupation Builder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : A-CF496

Amount of Each Receipt this Period
250

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

Mailing Address 167 Rice Mill

City Brunswick State GA Zip Code 31522-5451

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

Name of Employer Eckerd Seafood Inc Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : A-CF500

Amount of Each Receipt this Period
300

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	FOR LINE NUMBER: (check only one)	PAGE 7 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

A. Full Name (Last, First, Middle Initial)
Mrs. Melinda A. Egan

Mailing Address 308 Old Plantation Road

City State Zip Code
Jekyll Island GA 31527-0838

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 05 / 2014

Transaction ID : A-CF450

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mrs. Glenda S Hale

Mailing Address 150 Drawdy Lane

City State Zip Code
Brunswick GA 31523-1110

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 05 / 2014

Transaction ID : A-CF453

Amount of Each Receipt this Period
300

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

Mailing Address 209 Butler Avenue

City State Zip Code
Saint Simons Island GA 31522-5106

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

Name of Employer Occupation
W. Grubb RN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 01 / 2014

Transaction ID : A-IF481

Amount of Each Receipt this Period
500

Inkind: Postage, Event Catering, Event Supplies

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

A. Full Name (Last, First, Middle Initial)
Harry James

Mailing Address 131 Lake View Circle

City Brunswick State GA Zip Code 31525-2488

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

Name of Employer Air Team Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 28 / 2014

Transaction ID : A-CF414

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. David C Kyler

Mailing Address 103 Saint Catherine Street

City Saint Simons Island State GA Zip Code 31522-2013

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 05 / 2014

Transaction ID : A-CF451

Amount of Each Receipt this Period
300

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

Mailing Address 68 Canterbury Way

City Waverly State GA Zip Code 31565-2568

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

Name of Employer A+ Tires Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1050**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 28 / 2014

Transaction ID : A-CF417

Amount of Each Receipt this Period
50

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

A. Full Name (Last, First, Middle Initial)
Kester Moore

Mailing Address 68 Canterbury Way

City Waverly State GA Zip Code 31565-2568

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

Name of Employer A+ Tires Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1050**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 12 / 2014

Transaction ID : A-IF482

Amount of Each Receipt this Period
1000

Inkind: Billboard Rental

B. Full Name (Last, First, Middle Initial)
Peter Murphy

Mailing Address 901 River Club

City Sea Island State GA Zip Code 31561

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 05 / 2014

Transaction ID : A-CF454

Amount of Each Receipt this Period
200

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

Mailing Address 104 Oak Street

City Brunswick State GA Zip Code 31523-1124

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 28 / 2014

Transaction ID : A-CF421

Amount of Each Receipt this Period
100

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 Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

A. Full Name (Last, First, Middle Initial)
Joan Redding

Mailing Address 104 Oak Street

City Brunswick State GA Zip Code 31523-1124

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 05 / 2014

Transaction ID : A-CF456

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Jonathan R. Smith

Mailing Address 213 Paradise Marsh Circle

City Brunswick State GA Zip Code 31525-2116

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 05 / 2014

Transaction ID : A-CF463

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Jonathan R. Smith

Mailing Address 213 Paradise Marsh Circle

City Brunswick State GA Zip Code 31525-2116

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 05 / 2014

Transaction ID : A-CF464

Amount of Each Receipt this Period
350

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: PAGE 11 OF 38
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

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

Mailing Address 1000 Jetport Road

City Brunswick State GA Zip Code 31525-9220

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

Name of Employer Stambaugh Aviation Occupation Accountable Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **6200**

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 13 / 2014

Transaction ID : A-CF393

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Mark Stambaugh Jr.

Mailing Address 1000 Jetport Road

City Brunswick State GA Zip Code 31525-9220

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

Name of Employer Stambaugh Aviation Occupation Accountable Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **6200**

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 13 / 2014

Transaction ID : A-CF396

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Mark Stambaugh Jr.

Mailing Address 1000 Jetport Road

City Brunswick State GA Zip Code 31525-9220

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

Name of Employer Stambaugh Aviation Occupation Accountable Manager

Receipt For: 2014
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date **6200**

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 13 / 2014

Transaction ID : A-CF431

Amount of Each Receipt this Period
2600

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

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

6200.00

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

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

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

A. Full Name (Last, First, Middle Initial)
Darrin Strickland

Mailing Address 106 Barbour Island Lane

City Brunswick State GA Zip Code 31520-4429

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 18 / 2014

Transaction ID : A-CF446

Amount of Each Receipt this Period
200

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 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).....

200.00

12850.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Accent Signs		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 68 Canterbury Way		Amount of Each Disbursement this Period 340 Transaction ID : B-E-467
City Waverly State GA Zip Code 31565-2568	Purpose of Disbursement Administrative/Salary/Overhead: Printing Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement MM / DD / YYYY 01 / 21 / 2014
Mailing Address 2735 N Stemmons Freeway		Amount of Each Disbursement this Period 61.5 Transaction ID : B-E-510
City Dallas State TX Zip Code 75207-2211	Purpose of Disbursement Payroll Fees Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Bluemoon Website Design		Date of Disbursement MM / DD / YYYY 02 / 04 / 2014
Mailing Address PO Box 209		Amount of Each Disbursement this Period 2025 Transaction ID : B-E-424
City Brunswick State GA Zip Code 31521	Purpose of Disbursement Administrative/Salary/Overhead: Website Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2426.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

A. Capital One Card Services

Full Name (Last, First, Middle Initial)
Mailing Address Dept 9600

City Carol Stream State IL Zip Code 60128-0001

Purpose of Disbursement See Memo Entries

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 28 / 2014

Amount of Each Disbursement this Period: 4240.9

Transaction ID : B-E-470

Original vendors exceeding reporting threshold itemized as memo transactions.

B. United Cameras

Full Name (Last, First, Middle Initial)
Mailing Address 1062 Tower Lane

City Bensenville State IL Zip Code 60106-1031

Purpose of Disbursement Camera Repair

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 28 / 2014

Amount of Each Disbursement this Period: 105

Transaction ID : B-S-53

[MEMO ITEM]
Subitemization of Capital One Card Services(02/28/14)

C. Aristotle International, Inc.

Full Name (Last, First, Middle Initial)
Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement Compliance Software

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 28 / 2014

Amount of Each Disbursement this Period: 3300

Transaction ID : B-S-49

[MEMO ITEM]
Subitemization of Capital One Card Services(02/28/14)

SUBTOTAL of Disbursements This Page (optional)..... 4240.90

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial)

A. Parkers

Mailing Address 7301 New Jesup Highway

City Brunswick State GA Zip Code 31523-3905

Purpose of Disbursement Travel Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement 02 / 28 / 2014

Amount of Each Disbursement this Period 267.8

Transaction ID : B-S-51

[MEMO ITEM]
Subitemization of Capital One Card Services(02/28/14)

Full Name (Last, First, Middle Initial)

B. Capital One Card Services

Mailing Address Dept 9600

City Carol Stream State IL Zip Code 60128-0001

Purpose of Disbursement Finance Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement 02 / 28 / 2014

Amount of Each Disbursement this Period 71.39

Transaction ID : B-S-52

[MEMO ITEM]
Subitemization of Capital One Card Services(02/28/14)

Full Name (Last, First, Middle Initial)

c. The Steak Man

Mailing Address 133 Valerie Drive

City Brunswick State GA Zip Code 31525-9519

Purpose of Disbursement Event Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement 02 / 28 / 2014

Amount of Each Disbursement this Period 221.34

Transaction ID : B-S-48

[MEMO ITEM]
Subitemization of Capital One Card Services(02/28/14)

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. The Home Depot		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 200 Altama Connector Boulevard		Amount of Each Disbursement this Period 267.8
City Brunswick State GA Zip Code 31520-1909	Purpose of Disbursement Sign Supplies 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-50 [MEMO ITEM] Subitemization of Capital One Card Services(02/28/14)
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Comcast		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address PO Box 530098		Amount of Each Disbursement this Period 198.64
City Atlanta State GA Zip Code 30353	Purpose of Disbursement Administrative/Salary/Overhead: Internet 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-E-430
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Comcast		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address PO Box 530098		Amount of Each Disbursement this Period 130.12
City Atlanta State GA Zip Code 30353	Purpose of Disbursement Administrative/Salary/Overhead: Internet 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-E-425
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	328.76
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address PO Box 530098		Amount of Each Disbursement this Period 5,000.00 130.12
City Atlanta	State GA	
Zip Code 30353	Purpose of Disbursement Administrative/Salary/Overhead: Internet	Transaction ID : B-E-486
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Exchange Club of Brunswick		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address PO Box 1971		Amount of Each Disbursement this Period 250
City Brunswick	State GA	
Zip Code 31521-1971	Purpose of Disbursement Event Tickets	Transaction ID : B-E-487
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Georgia Republican Party		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address PO Box 550008		Amount of Each Disbursement this Period 5,220.00 5220
City Atlanta	State GA	
Zip Code 30355-2508	Purpose of Disbursement Filing Fee	Transaction ID : B-E-480
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5600.12
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 38			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Golden Isles Office Equipment, Inc.			Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 1205 Newcastle Street			Amount of Each Disbursement this Period 350.74
City Brunswick	State GA	Zip Code 31520-7534	
Purpose of Disbursement Office Supplies	Candidate Name		Transaction ID : B-E-405
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 001		

Full Name (Last, First, Middle Initial) B. Golden Isles Office Equipment, Inc.			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 1205 Newcastle Street			Amount of Each Disbursement this Period 603
City Brunswick	State GA	Zip Code 31520-7534	
Purpose of Disbursement Office Supplies	Candidate Name		Transaction ID : B-E-410
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 001		

Full Name (Last, First, Middle Initial) C. Golden Isles Office Equipment, Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 1205 Newcastle Street			Amount of Each Disbursement this Period 73.81
City Brunswick	State GA	Zip Code 31520-7534	
Purpose of Disbursement Office Supplies	Candidate Name		Transaction ID : B-E-435
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 001		

SUBTOTAL of Disbursements This Page (optional).....	1027.55
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 38			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Lee And Cates Glass Inc			Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address PO Box 41146			Amount of Each Disbursement this Period 254.91
City Jacksonville	State FL	Zip Code 32203-1146	
Purpose of Disbursement Office Expense		Category/ Type 001	Transaction ID : B-E-401
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) B. Logos and More			Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 3721 Community Road			Amount of Each Disbursement this Period 371
City Brunswick	State GA	Zip Code 31520-2842	
Purpose of Disbursement Administrative/Salary/Overhead: Printing		Category/ Type 001	Transaction ID : B-E-406
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) c. Logos and More			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 3721 Community Road			Amount of Each Disbursement this Period 84.8
City Brunswick	State GA	Zip Code 31520-2842	
Purpose of Disbursement Administrative/Salary/Overhead: Printing		Category/ Type 001	Transaction ID : B-E-472
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

SUBTOTAL of Disbursements This Page (optional).....	710.71
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 144 2nd Street		Amount of Each Disbursement this Period 17.25
City San Francisco	State CA	
Zip Code 94105-3716	Purpose of Disbursement CC Transaction Fees	Transaction ID : B-E-511
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 144 2nd Street		Amount of Each Disbursement this Period 11.5
City San Francisco	State CA	
Zip Code 94105-3716	Purpose of Disbursement CC Transaction Fees	Transaction ID : B-E-512
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 144 2nd Street		Amount of Each Disbursement this Period 5.76
City San Francisco	State CA	
Zip Code 94105-3716	Purpose of Disbursement CC Transaction Fees	Transaction ID : B-E-473
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	34.51
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 144 2nd Street		Amount of Each Disbursement this Period 11.5 Transaction ID : B-E-501
City San Francisco	State CA	
Zip Code 94105-3716	Purpose of Disbursement CC Transaction Fees	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 144 2nd Street		Amount of Each Disbursement this Period 1.54 Transaction ID : B-E-502
City San Francisco	State CA	
Zip Code 94105-3716	Purpose of Disbursement CC Transaction Fees	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2014
Mailing Address 144 2nd Street		Amount of Each Disbursement this Period 2.88 Transaction ID : B-E-503
City San Francisco	State CA	
Zip Code 94105-3716	Purpose of Disbursement CC Transaction Fees	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	15.92
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 144 2nd Street		Amount of Each Disbursement this Period 29 Transaction ID : B-E-489
City San Francisco	State CA Zip Code 94105-3716	
Purpose of Disbursement CC Transaction Fees	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2014
Mailing Address 144 2nd Street		Amount of Each Disbursement this Period 5.75 Transaction ID : B-E-492
City San Francisco	State CA Zip Code 94105-3716	
Purpose of Disbursement CC Transaction Fees	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Premier Printing		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 3694 Community Road		Amount of Each Disbursement this Period 439.06 Transaction ID : B-E-407
City Brunswick	State GA Zip Code 31520-2843	
Purpose of Disbursement Administrative/Salary/Overhead: Printing	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	473.81
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Premier Printing		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 3694 Community Road		Amount of Each Disbursement this Period 62.54
City Brunswick	State GA	
Zip Code 31520-2843	Purpose of Disbursement Administrative/Salary/Overhead: Printing	Transaction ID : B-E-441
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Professional Data Services Inc		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 2470 Daniels Bridge Road Suite 121		Amount of Each Disbursement this Period 3018.2
City Athens	State GA	
Zip Code 30606-6191	Purpose of Disbursement Compliance Consulting	Transaction ID : B-E-442
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Professional Data Services Inc		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address 2470 Daniels Bridge Road Suite 121		Amount of Each Disbursement this Period 1583.89
City Athens	State GA	
Zip Code 30606-6191	Purpose of Disbursement Compliance Consulting	Transaction ID : B-E-483
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional).....	4664.63
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 38		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Patrick Burnett		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 502 Neptune Way		Amount of Each Disbursement this Period 507.5 Transaction ID : B-E-377
City Saint Simons Island	State GA	
Zip Code 31522-4405	Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Patrick Burnett		Date of Disbursement MM / DD / YYYY 01 / 14 / 2014
Mailing Address 502 Neptune Way		Amount of Each Disbursement this Period 558.25 Transaction ID : B-E-389
City Saint Simons Island	State GA	
Zip Code 31522-4405	Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Patrick Burnett		Date of Disbursement MM / DD / YYYY 01 / 30 / 2014
Mailing Address 502 Neptune Way		Amount of Each Disbursement this Period 529.25 Transaction ID : B-E-411
City Saint Simons Island	State GA	
Zip Code 31522-4405	Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1595.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 38		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Patrick Burnett		Date of Disbursement MM / DD / YYYY 02 / 17 / 2014
Mailing Address 502 Neptune Way		Amount of Each Disbursement this Period 725 Transaction ID : B-E-443
City Saint Simons Island	State GA	
Zip Code 31522-4405	Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Patrick Burnett		Date of Disbursement MM / DD / YYYY 03 / 10 / 2014
Mailing Address 502 Neptune Way		Amount of Each Disbursement this Period 688.75 Transaction ID : B-E-477
City Saint Simons Island	State GA	
Zip Code 31522-4405	Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angela P Chapman		Date of Disbursement MM / DD / YYYY 02 / 04 / 2014
Mailing Address 130 Demery Drive		Amount of Each Disbursement this Period 912.76 Transaction ID : B-E-423
City Brunswick	State GA	
Zip Code 31523-1106	Purpose of Disbursement See Memo Entries	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional)	2326.51
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 02 / 04 / 2014
Mailing Address 805 Gloucester Street		Amount of Each Disbursement this Period 83.47
City Brunswick	State GA	Zip Code 31520-7073
Purpose of Disbursement Postage	Category/ Type 001	
Candidate Name	Transaction ID : B-S-14	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Subitemization of Angela Chapman(02/04/14)	

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement MM / DD / YYYY 02 / 04 / 2014
Mailing Address 155 Altama Connector		Amount of Each Disbursement this Period 63.4
City Brunswick	State GA	Zip Code 31525-1853
Purpose of Disbursement Telephone	Category/ Type 001	
Candidate Name	Transaction ID : B-S-17	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Subitemization of Angela Chapman(02/04/14)	

Full Name (Last, First, Middle Initial) c. United Cameras		Date of Disbursement MM / DD / YYYY 02 / 04 / 2014
Mailing Address 1062 Tower Lane		Amount of Each Disbursement this Period 105
City Bensenville	State IL	Zip Code 60106-1031
Purpose of Disbursement Office Equipment	Category/ Type 001	
Candidate Name	Transaction ID : B-S-22	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Subitemization of Angela Chapman(02/04/14)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Angela P Chapman			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014	
Mailing Address 130 Demery Drive			Amount of Each Disbursement this Period 525.67	
City Brunswick	State GA	Zip Code 31523-1106	Transaction ID : B-E-468	
Purpose of Disbursement See Memo Entries		Category/ Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. USPS			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014	
Mailing Address 805 Gloucester Street			Amount of Each Disbursement this Period 58.36	
City Brunswick	State GA	Zip Code 31520-7073	Transaction ID : B-S-26	
Purpose of Disbursement Postage		Category/ Type 001	[MEMO ITEM] Subitemization of Angela Chapman(02/28/14)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. AT&T			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014	
Mailing Address 155 Altama Connector			Amount of Each Disbursement this Period 332.76	
City Brunswick	State GA	Zip Code 31525-1853	Transaction ID : B-S-27	
Purpose of Disbursement Telephone		Category/ Type 001	[MEMO ITEM] Subitemization of Angela Chapman(02/28/14)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	525.67
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 38			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Aosoft Internet		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 15 Paradise Plaza # 192		Amount of Each Disbursement this Period 134.55
City Sarasota	State FL	Zip Code 34239-6905
Purpose of Disbursement Website	Category/Type 001	
Candidate Name	Transaction ID : B-S-28	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Subitemization of Angela Chapman(02/28/14)	

Full Name (Last, First, Middle Initial) B. Angela P Chapman		Date of Disbursement MM / DD / YYYY 03 / 25 / 2014
Mailing Address 130 Demery Drive		Amount of Each Disbursement this Period 169.09
City Brunswick	State GA	Zip Code 31523-1106
Purpose of Disbursement See Memo Entries	Category/Type 001	
Candidate Name	Transaction ID : B-E-493	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement MM / DD / YYYY 03 / 25 / 2014
Mailing Address 155 Altama Connector		Amount of Each Disbursement this Period 64.91
City Brunswick	State GA	Zip Code 31525-1853
Purpose of Disbursement Telephone	Category/Type 001	
Candidate Name	Transaction ID : B-S-32	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Subitemization of Angela Chapman(03/25/14)	

SUBTOTAL of Disbursements This Page (optional).....	169.09
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 38			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial)
A. USPS

Mailing Address 805 Gloucester Street

City Brunswick State GA Zip Code 31520-7073

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 25 / 2014

Amount of Each Disbursement this Period: 80.93

Transaction ID : B-S-33

[MEMO ITEM]
Subitemization of Angela Chapman(03/25/14)

Full Name (Last, First, Middle Initial)
B. Jeff Chapman

Mailing Address PO Box 1971

City Brunswick State GA Zip Code 31521-1971

Purpose of Disbursement Travel/Meeting Exp, Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 14 / 2014

Amount of Each Disbursement this Period: 7500

Transaction ID : B-E-398

Full Name (Last, First, Middle Initial)
c. Jeff Chapman

Mailing Address PO Box 1971

City Brunswick State GA Zip Code 31521-1971

Purpose of Disbursement See Memo Entry

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 04 / 2014

Amount of Each Disbursement this Period: 7980.73

Transaction ID : B-E-427

Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional)..... 15480.73

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 38			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. PCS Marketing Group LLC			Date of Disbursement MM / DD / YYYY 02 / 04 / 2014	
Mailing Address 2534 Commerce Blvd			Amount of Each Disbursement this Period 7980.73	
City Cincinnati	State OH	Zip Code 45241	Transaction ID : B-S-23	
Purpose of Disbursement Printing		Category/ Type 001	[MEMO ITEM] Subitemization of Jeff Chapman(02/04/14)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Jeff Chapman			Date of Disbursement MM / DD / YYYY 02 / 28 / 2014	
Mailing Address PO Box 1971			Amount of Each Disbursement this Period 2702.12	
City Brunswick	State GA	Zip Code 31521-1971	Transaction ID : B-E-471	
Purpose of Disbursement See Memo Entries		Category/ Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Stickersbanners.com			Date of Disbursement MM / DD / YYYY 02 / 28 / 2014	
Mailing Address 3741 Venture Drive Suite 335			Amount of Each Disbursement this Period 540	
City Duluth	State GA	Zip Code 30096-5636	Transaction ID : B-S-44	
Purpose of Disbursement Bumper Stickers		Category/ Type 001	[MEMO ITEM] Subitemization of Jeff Chapman(02/28/14)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2702.12
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 38			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 805 Gloucester Street		Amount of Each Disbursement this Period 460
City Brunswick	State GA	
Zip Code 31520-7073	Purpose of Disbursement Postage	Transaction ID : B-S-45
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Jeff Chapman(02/28/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Aosoft Internet		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 15 Paradise Plaza # 192		Amount of Each Disbursement this Period 152.49
City Sarasota	State FL	
Zip Code 34239-6905	Purpose of Disbursement Website	Transaction ID : B-S-35
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Jeff Chapman(02/28/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Nitro Signs		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 235 Rose Drive		Amount of Each Disbursement this Period 260
City Brunswick	State GA	
Zip Code 31520-2933	Purpose of Disbursement Printing	Transaction ID : B-S-46
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Jeff Chapman(02/28/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. WXMK		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 185 Benedict Road		Amount of Each Disbursement this Period 938.96
City Brunswick	State GA	
Zip Code 31520-2938	Purpose of Disbursement Radio Advertisement	Transaction ID : B-S-47
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Jeff Chapman(02/28/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Arthur Cook		Date of Disbursement MM / DD / YYYY 01 / 24 / 2014
Mailing Address 1126 Kings Cross		Amount of Each Disbursement this Period 463.51
City Brunswick	State GA	
Zip Code 31525-6823	Purpose of Disbursement Administrative/Salary/Overhead: Rent	Transaction ID : B-E-402
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Arthur Cook		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 1126 Kings Cross		Amount of Each Disbursement this Period 475.45
City Brunswick	State GA	
Zip Code 31525-6823	Purpose of Disbursement Administrative/Salary/Overhead: Rent	Transaction ID : B-E-469
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	938.96
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 38			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Arthur Cook		Date of Disbursement MM / DD / YYYY 03 / 18 / 2014
Mailing Address 1126 Kings Cross		Amount of Each Disbursement this Period 504.87 Transaction ID : B-E-485
City Brunswick	State GA	
Zip Code 31525-6823	Purpose of Disbursement Administrative/Salary/Overhead: Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Hannah Eades		Date of Disbursement MM / DD / YYYY 01 / 08 / 2014
Mailing Address 170 Palmera Lane		Amount of Each Disbursement this Period 73.26 Transaction ID : B-E-429
City Brunswick	State GA	
Zip Code 31525-3032	Purpose of Disbursement Mileage Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Hannah Eades		Date of Disbursement MM / DD / YYYY 01 / 15 / 2014
Mailing Address 170 Palmera Lane		Amount of Each Disbursement this Period 255 Transaction ID : B-E-399
City Brunswick	State GA	
Zip Code 31525-3032	Purpose of Disbursement Administrative/Salary/Overhead: Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	833.13
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Hannah Eades			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014		
Mailing Address 170 Palmera Lane			Amount of Each Disbursement this Period 267.75		
City Brunswick	State GA	Zip Code 31525-3032	Transaction ID : B-E-422		
Purpose of Disbursement Administrative/Salary/Overhead: Salary		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Hannah Eades			Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014		
Mailing Address 170 Palmera Lane			Amount of Each Disbursement this Period 281.58		
City Brunswick	State GA	Zip Code 31525-3032	Transaction ID : B-E-447		
Purpose of Disbursement Administrative/Salary/Overhead: Salary		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Hannah Eades			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014		
Mailing Address 170 Palmera Lane			Amount of Each Disbursement this Period 314.5		
City Brunswick	State GA	Zip Code 31525-3032	Transaction ID : B-E-488		
Purpose of Disbursement Administrative/Salary/Overhead: Salary		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	863.83
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Ashley Holmes		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2014
Mailing Address 209 Butler Avenue		Amount of Each Disbursement this Period 500 Transaction ID : B-I-481
City Saint Simons Island	State GA	
Zip Code 31522-5106	Purpose of Disbursement Inkind: Postage, Event Catering, Event Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Vann Jones		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address PO Box 461		Amount of Each Disbursement this Period 600 Transaction ID : B-E-449
City Fitzgerald	State GA	
Zip Code 31750-0461	Purpose of Disbursement Event Entertainment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Kester Moore		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 68 Canterbury Way		Amount of Each Disbursement this Period 1000 Transaction ID : B-I-482
City Waverly	State GA	
Zip Code 31565-2568	Purpose of Disbursement Inkind: Billboard Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Lauren Simmons		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014
Mailing Address 1104 Phillips Lane		Amount of Each Disbursement this Period 1349.06
City St Simons Island	State GA	
Zip Code 31522-1837	Purpose of Disbursement See Memo Entries	Transaction ID : B-E-476
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) B. Costco		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014
Mailing Address 4901 Gate Parkway		Amount of Each Disbursement this Period 439
City Jacksonville	State FL	
Zip Code 32246-4405	Purpose of Disbursement Event Catering	Transaction ID : B-S-29
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Lauren Simmons(03/07/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Al's Day-N-Night Service LLC		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014
Mailing Address 15 Pilgrims Lane		Amount of Each Disbursement this Period 840
City Brunswick	State GA	
Zip Code 31525-4777	Purpose of Disbursement Event Staff	Transaction ID : B-S-31
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Lauren Simmons(03/07/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1349.06
TOTAL This Period (last page this line number only).....	48407.51

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 38			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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)
Friends of Jeff Chapman

Full Name (Last, First, Middle Initial) A. Bill Eckerd		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 167 Rice Mill		Amount of Each Disbursement this Period 300
City Brunswick	State GA	
Zip Code 31522-5451	Purpose of Disbursement Contribution Refund: Refund	Transaction ID : B-E-498
Candidate Name	Category/ Type 010	
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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	300.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 38 OF 38
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Friends of Jeff Chapman

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jeff Chapman		Nature of Debt (Purpose): Travel Expenses, Office Expenses, Event Supplies, Postage, Shipping, and Membership Dues
Mailing Address PO Box 1971		
City State Zip Code Brunswick GA 31521-1971		

Outstanding Balance Beginning This Period 37027.17		Transaction ID : SD10-DEBT507	
Amount Incurred This Period 0	Payment This Period 7500	Outstanding Balance at Close of This Period 29527.17	

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

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

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

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

1) SUBTOTALS This Period This Page (optional)	29527.17
2) TOTALS This Period (last page this line number only)	29527.17
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	29527.17