

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

FRIENDS OF GARY GERRARD, INC

ADDRESS (number and street) ▼

PO BOX 67

Check if different than previously reported. (ACC)

LEXINGTON

GA

30648

2. **FEC IDENTIFICATION NUMBER** ▼

C C00544437

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

GA

10

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 / / in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Edd Lowe

Signature of Treasurer Edd Lowe

[Electronically Filed]

Date

/ /

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									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
FRIENDS OF GARY GERRARD, INC

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))....	23530.00	23530.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	23530.00	23530.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	22247.20	22247.20
(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)).....	22247.20	22247.20
8. Cash on Hand at Close of Reporting Period (from Line 27).....	41282.80	
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).....	40000.00	

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)

Write or Type Committee Name

FRIENDS OF GARY GERRARD, INC

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).....	19650.00	19650.00
(ii) Unitemized.....	1380.00	1380.00
(iii) TOTAL of contributions from individuals ▶	21030.00	21030.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	2500.00	2500.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	23530.00	23530.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	40000.00	40000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	40000.00	40000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	63530.00	63530.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	22247.20	22247.20
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	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	22247.20	22247.20

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	63530.00
25. SUBTOTAL (add Line 23 and Line 24).....	63530.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	22247.20
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	41282.80

**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 18
	<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	

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 GARY GERRARD, INC

A. Full Name (Last, First, Middle Initial)
Arthur G Avants

Mailing Address 1041 Willow Rd

City Athens State GA Zip Code 30606

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

Name of Employer Zaxby's Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2013

Transaction ID : SA11AI.4145

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 471 Peachtree Battle Ave

City Atlanta State GA Zip Code 30305

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

Name of Employer Fox Sports South Occupation Coordinating Producer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2013

Transaction ID : SA11AI.4230

Amount of Each Receipt this Period
 250.00

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

Mailing Address P.O. Box 277

City Crawford State GA Zip Code 30630

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

Name of Employer Cook Motor Company Occupation Owner/Car Dealer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2013

Transaction ID : SA11AI.4112

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: (check only one)	PAGE 6 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF GARY GERRARD, INC

A. Full Name (Last, First, Middle Initial)
Hardy Cook

Mailing Address 402 W Cloverhurst Ave

City Athens State GA Zip Code 30606

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 01 / 2013

Transaction ID : SA11AI.4173

Amount of Each Receipt this Period
 250.00

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

Mailing Address 337 E Church St

City Lexington State GA Zip Code 30648

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

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 11 / 2013

Transaction ID : SA11AI.4195

Amount of Each Receipt this Period
 500.00

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

Mailing Address 1120 Stonebridge Circle

City Watkinsville State GA Zip Code 30677

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

Name of Employer Crozier & Associates, Ltd. Occupation Real Estate Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 02 / 2013

Transaction ID : SA11AI.4171

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: (check only one)	PAGE 7 OF 18
	<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 GARY GERRARD, INC

Full Name (Last, First, Middle Initial) A. Eliza Culverhouse		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 30 / 2013	
Mailing Address 9001 Schoolhouse Rd		Transaction ID : SA11AI.4147	
City Coral Gables	State FL	Zip Code 33156	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) B. Hugh Culverhouse		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2013	
Mailing Address 121 Alhambra Plaze, Suite 1510		Transaction ID : SA11AI.4138	
City Coral Gables	State FL	Zip Code 33134	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Self-Employed	Occupation Investor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) C. Joe Dickerson		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2013	
Mailing Address 530 Brookwood Dr		Transaction ID : SA11AI.4234	
City Athens	State GA	Zip Code 30605	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	5700.00
TOTAL This Period (last page this line number only).....	5700.00

**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 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF GARY GERRARD, INC

A. Full Name (Last, First, Middle Initial)
Karen Green

Mailing Address 443 Barbarossa Ave

City State Zip Code
Coral Gables FL 33146

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

Name of Employer Occupation
Green Briar West Apartments Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 02 / 2013

Transaction ID : SA11AI.4169

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Billy Fred Griffin

Mailing Address 125 Creek Plantation Dr

City State Zip Code
Athens GA 30606

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

Name of Employer Occupation
Fresh Frozen Foods Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 25 / 2013

Transaction ID : SA11AI.4214

Amount of Each Receipt this Period
500.00

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

Mailing Address 221 W Church St

City State Zip Code
Lexington GA 30648

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
1000.00

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

Transaction ID : SA11AI.4189

Amount of Each Receipt this Period
1000.00

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: (check only one)	PAGE 9 OF 18
	<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 GARY GERRARD, INC

A. Full Name (Last, First, Middle Initial)
Robert Hein

Mailing Address 2970 Clairmont Rd Ste 220

City Atlanta State GA Zip Code 30329

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2013

Transaction ID : SA11AI.4212

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
HMS Construction Specialist LLC

Mailing Address 410 Morton Rd

City Athens State GA Zip Code 30605

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2013

Transaction ID : SA11AI.4141

Amount of Each Receipt this Period
 500.00

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

Mailing Address 410 Morton Rd

City Athens State GA Zip Code 30605

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

Name of Employer Self-Employed Occupation Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2013

Transaction ID : SA11AI.4141.0

Amount of Each Receipt this Period
 500.00

[MEMO ITEM]

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 10 OF 18
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF GARY GERRARD, INC

A. Full Name (Last, First, Middle Initial)
George Howington

Mailing Address 2165 Union Church Road

City State Zip Code
Bishop GA 30621

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

Name of Employer Occupation
Self-Employed Real Estate Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 10 2013

Transaction ID : SA11AI.4134

Amount of Each Receipt this Period
 1000.00

Contribution

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

Mailing Address 1130 Knob Creek Dr

City State Zip Code
Athens GA 30606

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

Name of Employer Occupation
Jerkins, Lowe and Co. CPA's CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 26 2013

Transaction ID : SA11AI.4228

Amount of Each Receipt this Period
 500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Carlos Rodriguez-Feo

Mailing Address PO Box 281

City State Zip Code
Lexington GA 30648

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

Name of Employer Occupation
Self-Employed 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 Y
 05 10 2013

Transaction ID : SA11AI.4132

Amount of Each Receipt this Period
 250.00

Contribution

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

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

1750.00

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

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF GARY GERRARD, INC

A. Full Name (Last, First, Middle Initial)
Thomas Schopler

Mailing Address 1118 N Northlake Drive

City State Zip Code
Hollywood FL 33019

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

Name of Employer Occupation
Atlantic Florida Dental Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2013

Transaction ID : SA11AI.4206

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Steven R Whitworth MD

Mailing Address 4181 Hospital Dr NE Ste 303

City State Zip Code
Covington GA 30014

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

Name of Employer Occupation
Newton Medical Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2013

Transaction ID : SA11AI.4248

Amount of Each Receipt this Period
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

3600.00

19650.00

**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 18
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF GARY GERRARD, INC

Full Name (Last, First, Middle Initial) A. Gary Gerrard		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 22 / 2013
Mailing Address 219 Gilmer Street		Transaction ID : SA11D.4111
City Lexington	State Zip Code GA 30648	
FEC ID number of contributing federal political committee.	C H4GA10063	Amount of Each Receipt this Period 2500.00
Name of Employer Friends of Gary Gerrard Inc	Occupation Candidate	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 42500.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y Y
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y Y
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 18
	<input type="checkbox"/> 11a 12 <input checked="" 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 GARY GERRARD, INC

A. Full Name (Last, First, Middle Initial)
Gary Gerrard

Mailing Address 219 Gilmer Street

City Lexington State GA Zip Code 30648

FEC ID number of contributing federal political committee. **C H4GA10063**

Name of Employer Friends of Gary Gerrard Inc Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
40000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2013

Transaction ID : SA13A.4104

Amount of Each Receipt this Period
40000.00

Candidate Loan

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 / 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 / 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).....

40000.00

40000.00

**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 14 OF 18			
	<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 GARY GERRARD, INC

Full Name (Last, First, Middle Initial) A. Hi-Tech Signs		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2013
Mailing Address 1018 North Fifth Ave		Amount of Each Disbursement this Period 668.75
City Rome	State GA	
Zip Code 30165	Purpose of Disbursement Promotional Materials	Transaction ID : SB17.4187
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) B. Insight Strategic Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2013
Mailing Address 2521 Gramercy Park Cr		Amount of Each Disbursement this Period 4000.00
City Duluth	State GA	
Zip Code 30097	Purpose of Disbursement Strategy Consulting	Transaction ID : SB17.4105
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. Insight Strategic Group		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2013
Mailing Address 2521 Gramercy Park Cr		Amount of Each Disbursement this Period 4065.00
City Duluth	State GA	
Zip Code 30097	Purpose of Disbursement Strategy Consulting	Transaction ID : SB17.4126
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).....	8733.75
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 18			
	<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 GARY GERRARD, INC

Full Name (Last, First, Middle Initial) A. Insight Strategic Group		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2013
Mailing Address 2521 Gramercy Park Cr		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.4198
City Duluth	State GA	
Zip Code 30097	Purpose of Disbursement Strategy Consulting	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. Insight Strategic Group		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2013
Mailing Address 2521 Gramercy Park Cr		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.4216
City Duluth	State GA	
Zip Code 30097	Purpose of Disbursement Reimbursement	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. Jose Castro's Catering		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2013
Mailing Address 1011 Oak Hill Ct		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.4210
City Watkinsville	State GA	
Zip Code 30677	Purpose of Disbursement Event Catering	Category/ Type 007
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).....	4450.00
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 18			
	<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 GARY GERRARD, INC

Full Name (Last, First, Middle Initial) A. Piedmont Impressions		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2013
Mailing Address PO Box 75		Amount of Each Disbursement this Period 629.16
City Lexington	State GA Zip Code 30630	
Purpose of Disbursement Printing	Category/Type	Transaction ID : SB17.4131
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		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2013
Mailing Address 401 W 15th St Ste 520		Amount of Each Disbursement this Period 39.38
City Austin	State TX Zip Code 78701	
Purpose of Disbursement Transaction Fees	Category/Type	Transaction ID : SB17.4177
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. Professional Data Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2013
Mailing Address 2470 Daniell's Bridge Rd, Ste 121		Amount of Each Disbursement this Period 1509.16
City Athens	State GA Zip Code 30606	
Purpose of Disbursement Compliance Consulting	Category/Type	Transaction ID : SB17.4149
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).....	2177.70
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 18			
	<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 GARY GERRARD, INC

Full Name (Last, First, Middle Initial) A. Rosetta Stone Communications			Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2013		
Mailing Address 1801 Peachtree, Suite 110			Amount of Each Disbursement this Period 3000.00		
City Atlanta	State GA	Zip Code 30309	Transaction ID : SB17.4127		
Purpose of Disbursement Polling		Category/ Type 005			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. William Candler Digital Strategy			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013		
Mailing Address 314 Etowah Drive			Amount of Each Disbursement this Period 2450.00		
City Cartersville	State GA	Zip Code 30120	Transaction ID : SB17.4165		
Purpose of Disbursement Web Design and Development		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Wingate Downs Photography			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2013		
Mailing Address 1860 Barnett Shoals Road Suite 103			Amount of Each Disbursement this Period 642.00		
City Athens	State GA	Zip Code 30605	Transaction ID : SB17.4136		
Purpose of Disbursement Photography		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	6092.00
TOTAL This Period (last page this line number only).....	21453.45

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **FRIENDS OF GARY GERRARD, INC** Transaction ID : **SC/10.4104**

LOAN SOURCE Full Name (Last, First, Middle Initial) Gary Gerrard	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 219 Gilmer Street		

City	State	ZIP Code
Lexington	GA	30648

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40000.00	0.00	40000.00

TERMS		Date Incurred	Date Due	Interest Rate	Secured:
M 04	D 22	Y 2013 Y	M M / D D / Y Y Y Y On Demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	▶	40000.00
TOTALS This Period (last page in this line only).....	▶	40000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.