

**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

LINDSEY FOR CONGRESS INC

ADDRESS (number and street) ▼

PO BOX 724194



Check if different than previously reported. (ACC)

ATLANTA

GA

31139

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00544429

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

☐ NEW (N)

OR

☒ AMENDED (A)

GA

11

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

07 / 01 / 2013

through

M M / D D / Y Y Y Y

09 / 30 / 2013

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 WADE C MCGUFFEY

Signature of Treasurer

WADE C MCGUFFEY

[Electronically Filed]

Date

M M / D D / Y Y Y Y

11 / 13 / 2013

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

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

**LINDSEY FOR CONGRESS INC**

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 1 |   | 2 | 0 | 1 | 3 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 1 | 3 |

|  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)  |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....  | 55903.84                | 213801.84                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....  | 1916.00                 | 1916.00                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 53987.84                | 211885.84                          |
| 7. Net Operating Expenditures  |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....   | 76576.35                | 85212.19                           |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....   | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 76576.35                | 85212.19                           |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....  | 161673.65               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 35000.00                |                                    |

**For further information contact:**

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 67

Write or Type Committee Name

**LINDSEY FOR CONGRESS INC**

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 1 |   | 2 | 0 | 1 | 3 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 1 | 3 |

**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).....**

48973.84

173973.84

**(ii) Unitemized.....**

5730.00

11578.00

**(iii) TOTAL of contributions from individuals ▶**

54703.84

185551.84

**(b) Political Party Committees.....**

0.00

0.00

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

1200.00

28250.00

**(d) The Candidate.....**

0.00

0.00

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

55903.84

213801.84

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

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

20000.00

35000.00

**(b) All Other Loans.....**

0.00

0.00

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

20000.00

35000.00

**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)..... ▶**

75903.84

248801.84

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 67

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 76576.35                      | 85212.19                           |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 1916.00                       | 1916.00                            |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 1916.00                       | 1916.00                            |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 78492.35                      | 87128.19                           |

## **III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 164262.16 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 75903.84  |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 240166.00 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 78492.35  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 161673.65 |

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

FOR LINE NUMBER:

PAGE 5 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**THOMAS E AUSTIN JR****A.**

Mailing Address 601 E PACES FERRY ROAD NE

City

ATLANTA

State

GA

Zip Code

30305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SAPRONOV &amp; ASSOCIATES

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 08    |   | 2013        |

**Transaction ID : SA11AI.392**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**FREDERICK BADING****B.**

Mailing Address 2616 SHARONDALE DRIVE NE

City

ATLANTA

State

GA

Zip Code

30305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LAW OFFICE OF FREDERICK A. BADING LLC

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 30    |   | 2013        |

**Transaction ID : SA11AI.458**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**DAVID BEGLEY****C.**

Mailing Address 8315 STEEPLECHASE DRIVE

City

ATLANTA

State

GA

Zip Code

30076

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

FINANCE EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 30    |   | 2013        |

**Transaction ID : SA11AI.459**

Amount of Each Receipt this Period

250.00

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

750.00

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

FOR LINE NUMBER:

PAGE 6 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**FRED D BENTLEY JR.****A.**

Mailing Address 241 WASHINGTON AVENUE

City

MARIETTA

State

GA

Zip Code

30060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BENTLEY, BENTLEY &amp; BENTLEY

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 27    |   | 2013        |

**Transaction ID : SA11AI.503**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**RANDALL BENTLEY****B.**

Mailing Address 1133 MOSSY ROCK ROAD

City

KENNESAW

State

GA

Zip Code

30152

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BENTLEY, BENTLEY &amp; BENTLEY

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 27    |   | 2013        |

**Transaction ID : SA11AI.504**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**KATHRYN BERGQUIST****C.**

Mailing Address 430 WHISPERING WIND LANE

City

ALPHARETTA

State

GA

Zip Code

30022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE BERGQUIST LAW FIRM LLC

Occupation

LAWYER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 18    |   | 2013        |

**Transaction ID : SA11AI.427**

Amount of Each Receipt this Period

250.00

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

750.00

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

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

PAGE 7 OF 67

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

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NAME OF COMMITTEE (In Full)  
**LINDSEY FOR CONGRESS INC**

|   |  |   |   |             |   |       |   |             |    |  |    |  |      |
|---|--|---|---|-------------|---|-------|---|-------------|----|--|----|--|------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>DAVID F BLACK</b>   |  | Date of Receipt<br><table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>05</td> <td></td> <td>2013</td> </tr> </table> |   | M M M       | / | D D D | / | Y Y Y Y Y Y | 09 |  | 05 |  | 2013 |
| M M M   | /  | D D D   | / | Y Y Y Y Y Y |   |       |   |             |    |  |    |  |      |
| 09  |  | 05  |   | 2013        |   |       |   |             |    |  |    |  |      |
| Mailing Address <b>4810 BRINKLEY LANE NE</b>  |  | <b>Transaction ID : SA11AI.414</b>  |   |             |   |       |   |             |    |  |    |  |      |
| City<br><b>ATLANTA</b>  | State<br><b>GA</b>   | Zip Code<br><b>30342</b>  |   |             |   |       |   |             |    |  |    |  |      |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  | Amount of Each Receipt this Period<br><table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>  |   | 250.00      |   |       |   |             |    |  |    |  |      |
| 250.00  |  |   |   |             |   |       |   |             |    |  |    |  |      |
| Name of Employer<br><b>STATE BANK AND TRUST</b>   | Occupation<br><b>COO</b>   |   |   |             |   |       |   |             |    |  |    |  |      |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table> | 250.00  |   |             |   |       |   |             |    |  |    |  |      |
| 250.00  |  |   |   |             |   |       |   |             |    |  |    |  |      |

  

|   |  |   |   |             |   |       |   |             |    |  |    |  |      |
|---|--|---|---|-------------|---|-------|---|-------------|----|--|----|--|------|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>STANLEY G BRADING</b>   |  | Date of Receipt<br><table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>27</td> <td></td> <td>2013</td> </tr> </table> |   | M M M       | / | D D D | / | Y Y Y Y Y Y | 09 |  | 27 |  | 2013 |
| M M M   | /  | D D D   | / | Y Y Y Y Y Y |   |       |   |             |    |  |    |  |      |
| 09  |  | 27  |   | 2013        |   |       |   |             |    |  |    |  |      |
| Mailing Address <b>1201 WEST PEACHTREE STREET NW<br/>SUITE 3250</b>   |  | <b>Transaction ID : SA11AI.513</b>  |   |             |   |       |   |             |    |  |    |  |      |
| City<br><b>ATLANTA</b>  | State<br><b>GA</b>   | Zip Code<br><b>30309</b>  |   |             |   |       |   |             |    |  |    |  |      |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  | Amount of Each Receipt this Period<br><table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>  |   | 250.00      |   |       |   |             |    |  |    |  |      |
| 250.00  |  |   |   |             |   |       |   |             |    |  |    |  |      |
| Name of Employer<br><b>KREVOLIN &amp; HORST</b>   | Occupation<br><b>ATTORNEY</b>  |   |   |             |   |       |   |             |    |  |    |  |      |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table> | 250.00  |   |             |   |       |   |             |    |  |    |  |      |
| 250.00  |  |   |   |             |   |       |   |             |    |  |    |  |      |

  

|   |  |   |   |             |   |       |   |             |    |  |    |  |      |
|---|--|---|---|-------------|---|-------|---|-------------|----|--|----|--|------|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>JAMES A BREEDLOVE</b>   |  | Date of Receipt<br><table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>09</td> <td></td> <td>2013</td> </tr> </table> |   | M M M       | / | D D D | / | Y Y Y Y Y Y | 08 |  | 09 |  | 2013 |
| M M M   | /  | D D D   | / | Y Y Y Y Y Y |   |       |   |             |    |  |    |  |      |
| 08  |  | 09  |   | 2013        |   |       |   |             |    |  |    |  |      |
| Mailing Address <b>646 OLD IVY ROAD NE</b>  |  | <b>Transaction ID : SA11AI.376</b>  |   |             |   |       |   |             |    |  |    |  |      |
| City<br><b>ATLANTA</b>  | State<br><b>GA</b>   | Zip Code<br><b>30342</b>  |   |             |   |       |   |             |    |  |    |  |      |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |  | Amount of Each Receipt this Period<br><table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>  |   | 250.00      |   |       |   |             |    |  |    |  |      |
| 250.00  |  |   |   |             |   |       |   |             |    |  |    |  |      |
| Name of Employer<br><b>FERNBANK MUSEUM</b>  | Occupation<br><b>VP</b>  |   |   |             |   |       |   |             |    |  |    |  |      |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table> | 250.00  |   |             |   |       |   |             |    |  |    |  |      |
| 250.00  |  |   |   |             |   |       |   |             |    |  |    |  |      |

  

|   |  |        |  |  |  |  |
|---|--|--------|--|--|--|--|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <table border="1"> <tr> <td colspan="5">750.00</td> </tr> </table> | 750.00 |  |  |  |  |
| 750.00  |  |        |  |  |  |  |
| <b>TOTAL</b> This Period (last page this line number only)..... | <table border="1"> <tr> <td colspan="5"></td> </tr> </table>       |        |  |  |  |  |
|   |  |        |  |  |  |  |

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

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

FOR LINE NUMBER:

PAGE 8 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

LINDSEY FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

JAMES BREEN

A.

Mailing Address 13510 LEXINGTON PLANTATION LANE

City

ALPHARETTA

State

GA

Zip Code

30004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE BREEN LAW FIRM, PA

Occupation

LAWYER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 18    |   | 2013        |

Transaction ID : SA11AI.428

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

ERIC BROADWELL

B.

Mailing Address 11140 WEST ROAD

City

ROSWELL

State

GA

Zip Code

30075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ROAD ID

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 30    |   | 2013        |

Transaction ID : SA11AI.528

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

DAVID J BURGE

C.

Mailing Address 2638 PARKSIDE DRIVE NE

City

ATLANTA

State

GA

Zip Code

30305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SMITH GAMBRELL &amp; RUSSELL, LLP

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 27    |   | 2013        |

Transaction ID : SA11AI.402

Amount of Each Receipt this Period

50.00

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

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

2800.00



**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 67

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

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 NAME OF COMMITTEE (In Full)  
**LINDSEY FOR CONGRESS INC**

|   |             |  |   |             |        |   |       |   |             |        |  |    |  |      |
|---|-------------|--|---|-------------|--------|---|-------|---|-------------|--------|--|----|--|------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>DAVID J BURGE</b>   |             |  | Date of Receipt<br><table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>20</td> <td></td> <td>2013</td> </tr> </table> |             | M M M  | / | D D D | / | Y Y Y Y Y Y | 09     |  | 20 |  | 2013 |
| M M M   | /           | D D D  | /   | Y Y Y Y Y Y |        |   |       |   |             |        |  |    |  |      |
| 09  |             | 20   |   | 2013        |        |   |       |   |             |        |  |    |  |      |
| Mailing Address 2638 PARKSIDE DRIVE NE  |             |  | <b>Transaction ID : SA11AI.490</b>  |             |        |   |       |   |             |        |  |    |  |      |
| City<br>ATLANTA   | State<br>GA | Zip Code<br>30305  | Amount of Each Receipt this Period<br><table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>  |             |        |   |       |   |             | 250.00 |  |    |  |      |
|   |             |  |   |             | 250.00 |   |       |   |             |        |  |    |  |      |
| FEC ID number of contributing federal political committee.<br><div>C</div>  |             |  | Amount of Each Receipt this Period<br><table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>  |             |        |   |       |   |             | 250.00 |  |    |  |      |
|   |             |  |   |             | 250.00 |   |       |   |             |        |  |    |  |      |
| Name of Employer<br>SMITH GAMBRELL & RUSSELL, LLP   |             | Occupation<br>ATTORNEY   | Amount of Each Receipt this Period<br><table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>  |             |        |   |       |   |             | 250.00 |  |    |  |      |
|   |             |  |   |             | 250.00 |   |       |   |             |        |  |    |  |      |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | Election Cycle-to-Date<br><table border="1"> <tr> <td colspan="5"></td> <td>800.00</td> </tr> </table> |   |             |        |   |       |   |             | 800.00 |  |    |  |      |
|   |             |  |   |             | 800.00 |   |       |   |             |        |  |    |  |      |

  

|   |             |  |   |             |        |   |       |   |             |        |  |    |  |      |
|---|-------------|--|---|-------------|--------|---|-------|---|-------------|--------|--|----|--|------|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>THOMAS S CARLOCK</b>  |             |  | Date of Receipt<br><table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>20</td> <td></td> <td>2013</td> </tr> </table> |             | M M M  | / | D D D | / | Y Y Y Y Y Y | 09     |  | 20 |  | 2013 |
| M M M   | /           | D D D  | /   | Y Y Y Y Y Y |        |   |       |   |             |        |  |    |  |      |
| 09  |             | 20   |   | 2013        |        |   |       |   |             |        |  |    |  |      |
| Mailing Address PO BOX 56887  |             |  | <b>Transaction ID : SA11AI.492</b>  |             |        |   |       |   |             |        |  |    |  |      |
| City<br>ATLANTA   | State<br>GA | Zip Code<br>30343  | Amount of Each Receipt this Period<br><table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table>  |             |        |   |       |   |             | 500.00 |  |    |  |      |
|   |             |  |   |             | 500.00 |   |       |   |             |        |  |    |  |      |
| FEC ID number of contributing federal political committee.<br><div>C</div>  |             |  | Amount of Each Receipt this Period<br><table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table>  |             |        |   |       |   |             | 500.00 |  |    |  |      |
|   |             |  |   |             | 500.00 |   |       |   |             |        |  |    |  |      |
| Name of Employer<br>CARLOCK COPELAND & STAIR  |             | Occupation<br>ATTORNEY   | Amount of Each Receipt this Period<br><table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table>  |             |        |   |       |   |             | 500.00 |  |    |  |      |
|   |             |  |   |             | 500.00 |   |       |   |             |        |  |    |  |      |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | Election Cycle-to-Date<br><table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table> |   |             |        |   |       |   |             | 500.00 |  |    |  |      |
|   |             |  |   |             | 500.00 |   |       |   |             |        |  |    |  |      |

  

|   |             |  |   |             |        |   |       |   |             |        |  |    |  |      |
|---|-------------|--|---|-------------|--------|---|-------|---|-------------|--------|--|----|--|------|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>MICHELLE CARVER</b>   |             |  | Date of Receipt<br><table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>08</td> <td></td> <td>2013</td> </tr> </table> |             | M M M  | / | D D D | / | Y Y Y Y Y Y | 08     |  | 08 |  | 2013 |
| M M M   | /           | D D D  | /   | Y Y Y Y Y Y |        |   |       |   |             |        |  |    |  |      |
| 08  |             | 08   |   | 2013        |        |   |       |   |             |        |  |    |  |      |
| Mailing Address 4219 BEVERLY LANE NE  |             |  | <b>Transaction ID : SA11AI.390</b>  |             |        |   |       |   |             |        |  |    |  |      |
| City<br>ATLANTA   | State<br>GA | Zip Code<br>30342  | Amount of Each Receipt this Period<br><table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>  |             |        |   |       |   |             | 250.00 |  |    |  |      |
|   |             |  |   |             | 250.00 |   |       |   |             |        |  |    |  |      |
| FEC ID number of contributing federal political committee.<br><div>C</div>  |             |  | Amount of Each Receipt this Period<br><table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>  |             |        |   |       |   |             | 250.00 |  |    |  |      |
|   |             |  |   |             | 250.00 |   |       |   |             |        |  |    |  |      |
| Name of Employer<br>HOMEMAKER   |             | Occupation<br>HOMEMAKER  | Amount of Each Receipt this Period<br><table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table>  |             |        |   |       |   |             | 250.00 |  |    |  |      |
|   |             |  |   |             | 250.00 |   |       |   |             |        |  |    |  |      |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | Election Cycle-to-Date<br><table border="1"> <tr> <td colspan="5"></td> <td>250.00</td> </tr> </table> |   |             |        |   |       |   |             | 250.00 |  |    |  |      |
|   |             |  |   |             | 250.00 |   |       |   |             |        |  |    |  |      |

  

|   |  |  |   |  |         |  |  |  |  |         |
|---|--|--|---|--|---------|--|--|--|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           |  |  | <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table> |  |         |  |  |  |  | 1000.00 |
|   |  |  |   |  | 1000.00 |  |  |  |  |         |
| <b>TOTAL</b> This Period (last page this line number only)..... |  |  | <table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>        |  |         |  |  |  |  |         |
|   |  |  |   |  |         |  |  |  |  |         |

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

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**WENDI L CLIFTON****A.**

Mailing Address 378 ARIZONA AVENUE NE

City

ATLANTA

State

GA

Zip Code

30307

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

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 09    |   | 2013      |

**Transaction ID : SA11AI.378**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**FREDERICK E COOPER****B.**

Mailing Address PO BOX 52367

City

ATLANTA

State

GA

Zip Code

30355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COOPER CAPITAL

Occupation

CHAIRMAN

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1311.92

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 23    |   | 2013      |

**Transaction ID : SA11AI.423**

Amount of Each Receipt this Period

311.92

IN-KIND: 9/18/13 FUNDRAISER EXPENSE (THE CAPITAL GRILLE)

Full Name (Last, First, Middle Initial)

**WILLIAM CUSTER****C.**

Mailing Address 1242 N DECATUR RD NE

City

ATLANTA

State

GA

Zip Code

30306

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

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 29    |   | 2013      |

**Transaction ID : SA11AI.462**

Amount of Each Receipt this Period

250.00

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

811.92

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LINDSEY FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

GLEN M DARBYSHIRE

Mailing Address 9958 WHITFIELD AVENUE

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing federal political committee.

C

Name of Employer

BOUHAN &amp; FALLIGANT

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 14    |   | 2013        |

Transaction ID : SA11AI.374

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

CHRIS DARDAMAN

Mailing Address 3280 PEACHTREE ROAD NE SUITE 2075

City

ATLANTA

State

GA

Zip Code

30305

FEC ID number of contributing federal political committee.

C

Name of Employer

BRIGHTWORTH

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 12    |   | 2013        |

Transaction ID : SA11AI.409

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

RANDALL H DAVIS

Mailing Address 100 PHOENIX AIR DRIVE SE

City

CARTERSVILLE

State

GA

Zip Code

30120

FEC ID number of contributing federal political committee.

C

Name of Employer

PHOENIX AIR

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 24    |   | 2013        |

Transaction ID : SA11AI.437

Amount of Each Receipt this Period

500.00

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

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

1250.00

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

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

FOR LINE NUMBER:

PAGE 12 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

LINDSEY FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

JAY DAVIS

A.

Mailing Address ONE NATIONAL DRIVE

City

ATLANTA

State

GA

Zip Code

30336

FEC ID number of contributing federal political committee.

C

Name of Employer

NATIONAL DISTRIBUTING COMPANY

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 27    |   | 2013      |

Transaction ID : SA11AI.506

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

WILLIAM DEGOLIAN

B.

Mailing Address 2610 RIVERS ROAD NW

City

ATLANTA

State

GA

Zip Code

30305

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

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 26    |   | 2013      |

Transaction ID : SA11AI.440

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

KEVIN L DUNN

C.

Mailing Address 4741 BENTLEY PLACE

City

DULUTH

State

GA

Zip Code

30096

FEC ID number of contributing federal political committee.

C

Name of Employer

CLIENT PROFILES

Occupation

CTO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 27    |   | 2013      |

Transaction ID : SA11AI.523

Amount of Each Receipt this Period

500.00

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

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

1750.00

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

FOR LINE NUMBER:

PAGE 13 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**CHARLES M EATON JR****A.**

Mailing Address 3567 RANIER DRIVE NW

City

ATLANTA

State

GA

Zip Code

30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PSC

Occupation

COMMISSIONER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 08    |   | 2013      |

**Transaction ID : SA11AI.393**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JOSEPH W EVANS****B.**

Mailing Address 4270 W CLUB LANE NE

City

ATLANTA

State

GA

Zip Code

30319

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE BANK &amp; TRUST

Occupation

CEO

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 27    |   | 2013      |

**Transaction ID : SA11AI.520**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**LINDA FINLEY****C.**

Mailing Address 860 LORIDANS CIRCLE. NE

City

ATLANTA

State

GA

Zip Code

30342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BAKER, DONELSON, BEARMAN, CALDWELL

Occupation

ATTORNEY

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 01    |   | 2013      |

**Transaction ID : SA11AI.94**

Amount of Each Receipt this Period

500.00

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

2000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**JOHN FLOYD****A.**

Mailing Address 4323 VALLEY TRAIL DRIVE

City

ATLANTA

State

GA

Zip Code

30339

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BONDURANT MIXSON &amp; ELMORE

Occupation

ATTORNEY

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 25    |   | 2013        |

**Transaction ID : SA11AI.442**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**WARNER FOX****B.**

Mailing Address 4000 SUNTRUST PLAZA

City

ATLANTA

State

GA

Zip Code

30308

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HAWKINS PARNELL THACKSTON &amp; YOUNG

Occupation

LAWYER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 29    |   | 2013        |

**Transaction ID : SA11AI.464**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**STACY G FREEMAN****C.**

Mailing Address 968 PLYMOUTH ROAD NE

City

ATLANTA

State

GA

Zip Code

30306

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

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2013        |

**Transaction ID : SA11AI.496**

Amount of Each Receipt this Period

500.00

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

1250.00

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

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

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

FOR LINE NUMBER:

PAGE 15 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

LINDSEY FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

DAVID H GAMBRELL

A.

 Mailing Address 3060 PEACHTREE ROAD NW  
 SUITE 1890

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30305    |

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 BAKER DONELSON, PC

 Occupation  
 ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 08    |   | 2013      |

Transaction ID : SA11AI.383

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

RICHARD GARD

B.

Mailing Address 52 WILLOW HILL ROAD

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| SAINT LOUIS | MO    | 63124    |

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 MISSOURI LAWYERS MEDIA

 Occupation  
 PUBLISHER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 09    |   | 2013      |

Transaction ID : SA11AI.410

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

DEBRA GOLDMAN

C.

Mailing Address THE OVATION #603 3040 PEACHTREE R

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30305    |

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 ICHTER THOMAS, LLC

 Occupation  
 COO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 25    |   | 2013      |

Transaction ID : SA11AI.443

Amount of Each Receipt this Period

250.00

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:

PAGE 16 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

LINDSEY FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

ROBERT L GOLDSTUCKER

A.

Mailing Address 235 PEACHTREE STREET  
SUITE 1500

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30303    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NALL & MILLER

Occupation  
ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 13    |   | 2013      |

Transaction ID : SA11AI.419

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

FRANK GOULDING

B.

Mailing Address P.O. BOX 942085

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 31141    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEWELL RECYCLING, LLC

Occupation  
RECYCLING EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 25    |   | 2013      |

Transaction ID : SA11AI.444

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ASHLEIGH M GRAHAM

C.

Mailing Address 4190 ROSWELL ROAD

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30306    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 27    |   | 2013      |

Transaction ID : SA11AI.505

Amount of Each Receipt this Period

500.00

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

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

3000.00



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

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

FOR LINE NUMBER:

PAGE 17 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

LINDSEY FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

JOHN GUEST

A.

Mailing Address 76 26TH STREET

City

ATLANTA

State

GA

Zip Code

30309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARSON GUEST, INC.Occupation  
INTERIOR DESIGNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 18    |   | 2013      |

Transaction ID : SA11AI.430

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

CHARLES HARMAN

B.

Mailing Address 1959 RIVER FOREST DR.

City

MARIETTA

State

GA

Zip Code

30068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EMORY UNIVERSITYOccupation  
VICE PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 28    |   | 2013      |

Transaction ID : SA11AI.466

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

WILLIAM E HAUSER JR

C.

Mailing Address 3952 WIEUCA ROAD NE

City

ATLANTA

State

GA

Zip Code

30342

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
PHYSICIAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 27    |   | 2013      |

Transaction ID : SA11AI.502

Amount of Each Receipt this Period

250.00

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

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

1000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**ELLEN L HAYES**

**A.**

Mailing Address 6240 RIVERCLIFFE DRIVE NW

City

SANDY SPRINGS

State

GA

Zip Code

30328

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ALL SAINTS EPISCOPAL CHURCH

Occupation

DEVELOPMENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 08 / 2013

Transaction ID : SA11AI.389

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**TERRY HOBBS**

**B.**

Mailing Address PO BOX 54578

City

ATLANTA

State

GA

Zip Code

30308

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOBBS & ASSOCIATES

Occupation

CONSULTANT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.97

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**TERRY HOBBS**

**C.**

Mailing Address PO BOX 54578

City

ATLANTA

State

GA

Zip Code

30308

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOBBS & ASSOCIATES

Occupation

CONSULTANT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 26 / 2013

Transaction ID : SA11AI.455

Amount of Each Receipt this Period

250.00

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

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

750.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LINDSEY FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

MARSHA S HOLCOMB

A.

Mailing Address 4614 MEADOW VALLEY DRIVE NE

City

ATLANTA

State

GA

Zip Code

30342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

CPA

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 08    |   | 2013      |

Transaction ID : SA11AI.379

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

BILL HOLLEY

B.

Mailing Address 184 PEACHTREE BATTLE AVE

City

ATLANTA

State

GA

Zip Code

30305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PARKER, HUDSON, RAINER &amp; DOBBS

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 29    |   | 2013      |

Transaction ID : SA11AI.467

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

DOUGLAS W HOPKINS

C.

Mailing Address PO BOX 2381

City

TUCKER

State

GA

Zip Code

30085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COCA COLA COMPANY

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 20    |   | 2013      |

Transaction ID : SA11AI.495

Amount of Each Receipt this Period

500.00

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

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

1250.00

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

PAGE 20 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**LEWIS C HORNE JR.**

Mailing Address 2540 PINEY WOOD LANE

City

EAST POINT

State

GA

Zip Code

30344

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SCHIFF HARDIN

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 27    |   | 2013      |

Transaction ID : SA11AI.514

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**WILLIAM B HOWELL**

Mailing Address 2570 ARDEN ROAD NW

City

ATLANTA

State

GA

Zip Code

30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 18    |   | 2013      |

Transaction ID : SA11AI.337

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**FAY S HOWELL**

Mailing Address 2570 ARDEN ROAD NW

City

ATLANTA

State

GA

Zip Code

30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 18    |   | 2013      |

Transaction ID : SA11AI.338

Amount of Each Receipt this Period

2500.00

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

5250.00

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

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

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 (check only one)

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

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 NAME OF COMMITTEE (In Full)  
**LINDSEY FOR CONGRESS INC**

|   |       |   |   |           |         |   |       |   |           |    |  |    |  |      |
|---|-------|---|---|-----------|---------|---|-------|---|-----------|----|--|----|--|------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>CARY ICHTER</b>   |       |   | Date of Receipt<br><table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>27</td> <td></td> <td>2013</td> </tr> </table> |           | M M M   | / | D D D | / | Y Y Y Y Y | 09 |  | 27 |  | 2013 |
| M M M   | /     | D D D   | /   | Y Y Y Y Y |         |   |       |   |           |    |  |    |  |      |
| 09  |       | 27  |   | 2013      |         |   |       |   |           |    |  |    |  |      |
| Mailing Address 3962 WIEUCA ROAD NE   |       |   | <b>Transaction ID : SA11AI.522</b>  |           |         |   |       |   |           |    |  |    |  |      |
| City  | State | Zip Code  |   |           |         |   |       |   |           |    |  |    |  |      |
| ATLANTA   | GA    | 30342   |   |           |         |   |       |   |           |    |  |    |  |      |
| FEC ID number of contributing federal political committee.  |       |   | Amount of Each Receipt this Period<br><table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>  |           | 500.00  |   |       |   |           |    |  |    |  |      |
| 500.00  |       |   |   |           |         |   |       |   |           |    |  |    |  |      |
| Name of Employer<br>ICHTER THOMAS   |       | Occupation<br>ATTORNEY  |   |           |         |   |       |   |           |    |  |    |  |      |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |       | Election Cycle-to-Date<br><table border="1"> <tr> <td colspan="5">1000.00</td> </tr> </table> |   |           | 1000.00 |   |       |   |           |    |  |    |  |      |
| 1000.00   |       |   |   |           |         |   |       |   |           |    |  |    |  |      |

  

|   |       |  |   |           |        |   |       |   |           |    |  |    |  |      |
|---|-------|--|---|-----------|--------|---|-------|---|-----------|----|--|----|--|------|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>BRYNDA INSLEY</b>   |       |  | Date of Receipt<br><table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>22</td> <td></td> <td>2013</td> </tr> </table> |           | M M M  | / | D D D | / | Y Y Y Y Y | 09 |  | 22 |  | 2013 |
| M M M   | /     | D D D  | /   | Y Y Y Y Y |        |   |       |   |           |    |  |    |  |      |
| 09  |       | 22   |   | 2013      |        |   |       |   |           |    |  |    |  |      |
| Mailing Address 181 14TH STREET SUITE 200   |       |  | <b>Transaction ID : SA11AI.431</b>  |           |        |   |       |   |           |    |  |    |  |      |
| City  | State | Zip Code   |   |           |        |   |       |   |           |    |  |    |  |      |
| ATLANTA   | GA    | 30309  |   |           |        |   |       |   |           |    |  |    |  |      |
| FEC ID number of contributing federal political committee.  |       |  | Amount of Each Receipt this Period<br><table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>  |           | 250.00 |   |       |   |           |    |  |    |  |      |
| 250.00  |       |  |   |           |        |   |       |   |           |    |  |    |  |      |
| Name of Employer<br>INSLEY & RACE, LLC  |       | Occupation<br>ATTORNEY   |   |           |        |   |       |   |           |    |  |    |  |      |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |       | Election Cycle-to-Date<br><table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table> |   |           | 250.00 |   |       |   |           |    |  |    |  |      |
| 250.00  |       |  |   |           |        |   |       |   |           |    |  |    |  |      |

  

|   |       |  |   |           |        |   |       |   |           |    |  |    |  |      |
|---|-------|--|---|-----------|--------|---|-------|---|-----------|----|--|----|--|------|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>BOYD JOHNSON</b>  |       |  | Date of Receipt<br><table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>05</td> <td></td> <td>2013</td> </tr> </table> |           | M M M  | / | D D D | / | Y Y Y Y Y | 09 |  | 05 |  | 2013 |
| M M M   | /     | D D D  | /   | Y Y Y Y Y |        |   |       |   |           |    |  |    |  |      |
| 09  |       | 05   |   | 2013      |        |   |       |   |           |    |  |    |  |      |
| Mailing Address PO BOX 112  |       |  | <b>Transaction ID : SA11AI.416</b>  |           |        |   |       |   |           |    |  |    |  |      |
| City  | State | Zip Code   |   |           |        |   |       |   |           |    |  |    |  |      |
| CISCO   | GA    | 30708  |   |           |        |   |       |   |           |    |  |    |  |      |
| FEC ID number of contributing federal political committee.  |       |  | Amount of Each Receipt this Period<br><table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>  |           | 250.00 |   |       |   |           |    |  |    |  |      |
| 250.00  |       |  |   |           |        |   |       |   |           |    |  |    |  |      |
| Name of Employer<br>JOHNSON HAILEY LLC  |       | Occupation<br>REAL ESTATE  |   |           |        |   |       |   |           |    |  |    |  |      |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |       | Election Cycle-to-Date<br><table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table> |   |           | 250.00 |   |       |   |           |    |  |    |  |      |
| 250.00  |       |  |   |           |        |   |       |   |           |    |  |    |  |      |

  

|   |  |  |   |  |         |  |  |  |  |
|---|--|--|---|--|---------|--|--|--|--|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           |  |  | <table border="1"> <tr> <td colspan="5">1000.00</td> </tr> </table> |  | 1000.00 |  |  |  |  |
| 1000.00   |  |  |   |  |         |  |  |  |  |
| <b>TOTAL</b> This Period (last page this line number only)..... |  |  | <table border="1"> <tr> <td colspan="5"></td> </tr> </table>        |  |         |  |  |  |  |
|   |  |  |   |  |         |  |  |  |  |

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LINDSEY FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

JERRY L KEEN

A.

Mailing Address 1050 GLENRIDGE PLACE NE

City

ATLANTA

State

GA

Zip Code

30342

FEC ID number of contributing federal political committee.

C

Name of Employer

TROUTMAN SANDERS LLP

Occupation

GOVERNMENT AFFAIRS

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 20    |   | 2013      |

Transaction ID : SA11AI.498

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

KURT KEGEL

B.

Mailing Address 2600 NORTH THOMPSON ROAD

City

ATLANTA

State

GA

Zip Code

30319

FEC ID number of contributing federal political committee.

C

Name of Employer

KEGEL MCBURNEY, LLC

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 25    |   | 2013      |

Transaction ID : SA11AI.446

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

LINDA A KLEIN

C.

Mailing Address 3414 PEACHTREE ROAD, #1600

City

ATLANTA

State

GA

Zip Code

30326

FEC ID number of contributing federal political committee.

C

Name of Employer

BAKER DONELSON

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 05    |   | 2013      |

Transaction ID : SA11AI.417

Amount of Each Receipt this Period

500.00

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

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

1100.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LINDSEY FOR CONGRESS INC**

**A.** Full Name (Last, First, Middle Initial)  
**R CHARLES LOUDERMILK SR.**

Mailing Address 516 E PACES FERRY ROAD

City State Zip Code  
ATLANTA GA 30305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 20 2013

Transaction ID : SA11AI.488

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**SEAN M LYNCH**

Mailing Address 4504 WHITESTONE WAY

City State Zip Code  
SUWANEE GA 30024

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

350.00

Date of Receipt

M M / D D / Y Y Y Y  
09 27 2013

Transaction ID : SA11AI.511

Amount of Each Receipt this Period

350.00

**C.** Full Name (Last, First, Middle Initial)  
**DANIEL MACINTYRE**

Mailing Address 40 GLEN OAKS DR

City State Zip Code  
ATLANTA GA 30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PAGE PERRY

Occupation  
ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
08 30 2013

Transaction ID : SA11AI.407

Amount of Each Receipt this Period

250.00

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

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

1600.00

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**TERRY A MATHEWS****A.**

Mailing Address 1118 ASHTON BLUFF DRIVE

City

ATLANTA

State

GA

Zip Code

30319

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MATHEWS &amp; MAXWELL

Occupation

GOVERNMENT AFFAIRS

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2013        |

Transaction ID : SA11AI.497

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**ROBERT D MCCALLUM JR.****B.**Mailing Address 2440 PEACHTREE ROAD NW  
NO. 15, REGENTS PARK

City

ATLANTA

State

GA

Zip Code

30305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 13    |   | 2013        |

Transaction ID : SA11AI.422

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JOHN J MCCLOSKEY****C.**

Mailing Address 2170 BROOKVIEW DRIVE

City

ATLANTA

State

GA

Zip Code

30318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELECT MANAGEMENT RESOURCES

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 08    |   | 2013        |

Transaction ID : SA11AI.380

Amount of Each Receipt this Period

2600.00

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

3350.00



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

 Use separate schedule(s)  
 for each category of the  
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FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LINDSEY FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

MICHAEL MCCONNELL

A.

Mailing Address 115 GROGANS LAKE DRIVE

City

SANDY SPRINGS

State

GA

Zip Code

30350

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JONES DAY

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 23    |   | 2013      |

Transaction ID : SA11AI.432

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

DOUGLAS MCKILLIP

B.

Mailing Address 1200 TANGLEBROOK DRIVE

City

ATHENS

State

GA

Zip Code

30606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCKILLIP LAW FIRM, LLC

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 30    |   | 2013      |

Transaction ID : SA11AI.469

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

J. MICHAEL NIXON

C.

Mailing Address 4080 MCGINNIS FERRY ROAD  
SUITE 1502

City

ALPHARETTA

State

GA

Zip Code

30005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TCI CONTRACTING

Occupation

REAL ESTATE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 13    |   | 2013      |

Transaction ID : SA11AI.421

Amount of Each Receipt this Period

1000.00

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

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

1500.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LINDSEY FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

ANDREW OWEN

A.

Mailing Address 28 LULLWATER ESTATE NE

City

ATLANTA

State

GA

Zip Code

30307

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OWEN GLEATON EGAN JONES &amp; SWEENEY,

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 27    |   | 2013      |

Transaction ID : SA11AI.521

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

WILLIAM A PARKER JR

B.

Mailing Address 1900 GARRAUX WOODS ROAD NW

City

ATLANTA

State

GA

Zip Code

30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMANCHE INVESTMENT COMPANY

Occupation

FINANCE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 18    |   | 2013      |

Transaction ID : SA11AI.336

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

W. RAY PERSONS

C.

Mailing Address 6330 RIVERSIDE DRIVE N. W.

City

ATLANTA

State

GA

Zip Code

30328

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KING &amp; SPALDING

Occupation

LAWYER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 01    |   | 2013      |

Transaction ID : SA11AI.108

Amount of Each Receipt this Period

250.00

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

750.00

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

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

FOR LINE NUMBER:

PAGE 27 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**ROBERT T QUATTROCCHI****A.**

Mailing Address 5960 WHITESTONE LANE

City

SUWANEE

State

GA

Zip Code

30024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NORTHSIDE HOSPITAL

Occupation

PRESIDENT/CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 30    |   | 2013      |

**Transaction ID : SA11AI.533**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**WILLIAM RAGLAND****B.**

Mailing Address 2 ALBEMARLE DRIVE NW

City

ATLANTA

State

GA

Zip Code

30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WOMBLE CARLYLE SANDRIDGE &amp; RICE, LLP

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 26    |   | 2013      |

**Transaction ID : SA11AI.450**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**JOHN RAINS****C.**

Mailing Address 1201 W PEACHTREE STREET NW SUITE 3

City

ATLANTA

State

GA

Zip Code

30309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BONDURANT, MIXSON &amp; ELMORE LLP

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 30    |   | 2013      |

**Transaction ID : SA11AI.474**

Amount of Each Receipt this Period

250.00

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

1500.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

LINDSEY FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

DIANA O RAMSAY

A.

Mailing Address 667 E TUGALO STREET

City

TOCCOA

State

GA

Zip Code

30577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 05    |   | 2013      |

Transaction ID : SA11AI.415

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MARK RILEY

B.

Mailing Address 656 COLLIER COMMONS CIRCLE NW

City

ATLANTA

State

GA

Zip Code

30318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

URBAN REALTY PARTNERS

Occupation

REAL ESTATE INVESTOR/ FOUNDATION EX

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 29    |   | 2013      |

Transaction ID : SA11AI.475

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

DAVID A ROBERTS

C.

Mailing Address 4660 CLUB CIRCLE NE

City

ATLANTA

State

GA

Zip Code

30319

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE ROBERTS FIRM

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1600.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 30    |   | 2013      |

Transaction ID : SA11AI.483

Amount of Each Receipt this Period

100.00

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

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

850.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LINDSEY FOR CONGRESS INC**

A. Full Name (Last, First, Middle Initial)  
**CHRISTOPHER ROULAND**

Mailing Address 2790 ANDREWS DRIVE

City State Zip Code  
ATLANTA GA 30305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ENDGAME SYSTEMS

Occupation  
CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2013

Transaction ID : SA11AI.527

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)  
**CHARLES RUFFIN**

Mailing Address 121 COVINGTON DR

City State Zip Code  
MACON GA 31210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BAKER DONELSON

Occupation  
ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 29 2013

Transaction ID : SA11AI.476

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)  
**MARK SANDERS**

Mailing Address 1170 RAMSER DRIVE

City State Zip Code  
BOGART GA 30622

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SANDERS & ASSOCIATES

Occupation  
ATTORNEY / GOVERNMENT RELATIONS

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 24 2013

Transaction ID : SA11AI.433

Amount of Each Receipt this Period

1000.00

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

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

3750.00

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

PAGE 30 OF 67

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

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

NAME OF COMMITTEE (In Full)  
**LINDSEY FOR CONGRESS INC**

|   |          |   |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
|---|----------|---|---|-------------|---|-------|---|-------------|----|--|----|--|------|--|--|--|--|--|---------|--|--|--|---------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>LES A SCHNEIDER</b>   |          | Date of Receipt<br><table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>30</td> <td></td> <td>2013</td> </tr> </table>   |   | M M M       | / | D D D | / | Y Y Y Y Y Y | 09 |  | 30 |  | 2013 |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| M M M   | /        | D D D   | / | Y Y Y Y Y Y |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| 09  |          | 30  |   | 2013        |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| Mailing Address 969 CASTLE FALLS DRIVE NE   |          | <b>Transaction ID : SA11AI.535</b>  |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| City ATLANTA  | State GA | Zip Code 30329  |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| FEC ID number of contributing federal political committee.  |          | <table border="1"> <tr> <td>C</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>   |   | C           |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| C   |          |   |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| Name of Employer<br>WIMBERLY, LASWON, STECKEL, SCHNEIDER  |          | Occupation<br>ATTORNEY  |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |          | Election Cycle-to-Date<br><table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>300.00</td> </tr> </table> |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 300.00 |
|   |          |   |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
|   |          |   |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  | 300.00  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>JOHN S SHERMAN</b>  |          | Date of Receipt<br><table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>20</td> <td></td> <td>2013</td> </tr> </table>   |   | M M M       | / | D D D | / | Y Y Y Y Y Y | 09 |  | 20 |  | 2013 |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| M M M   | /        | D D D   | / | Y Y Y Y Y Y |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| 09  |          | 20  |   | 2013        |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| Mailing Address 2660 PEACHTREE ROAD NW<br>APT 32C   |          | <b>Transaction ID : SA11AI.489</b>  |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| City ATLANTA  | State GA | Zip Code 30305  |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
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| C   |          |   |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| Name of Employer<br>RETIRED   |          | Occupation<br>RETIRED   |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |          | Election Cycle-to-Date<br><table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>500.00</td> </tr> </table> |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 500.00 |
|   |          |   |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
|   |          |   |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  | 500.00  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>JENNIE SIMMONS</b>  |          | Date of Receipt<br><table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>30</td> <td></td> <td>2013</td> </tr> </table>   |   | M M M       | / | D D D | / | Y Y Y Y Y Y | 09 |  | 30 |  | 2013 |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| M M M   | /        | D D D   | / | Y Y Y Y Y Y |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| 09  |          | 30  |   | 2013        |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| Mailing Address 4530 LOGGINS ROAD   |          | <b>Transaction ID : SA11AI.536</b>  |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| City GAINESVILLE  | State GA | Zip Code 30506  |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
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| C   |          |   |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| Name of Employer<br>SURGERY CENTER CONSULTANTS, INC.  |          | Occupation<br>PHYSICIAN   |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |          | Election Cycle-to-Date<br><table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>500.00</td> </tr> </table> |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 500.00 |
|   |          |   |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
|   |          |   |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  | 500.00  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....   |          | <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>1300.00</td> </tr> </table>  |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  | 1300.00 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
|   |          |   |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  | 1300.00 |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
| <b>TOTAL</b> This Period (last page this line number only).....   |          | <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>   |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |
|   |          |   |   |             |   |       |   |             |    |  |    |  |      |  |  |  |  |  |         |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |

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

PAGE 31 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**RAY S SMITH III**Mailing Address **FIVE CONCOURSE PARKWAY****SUITE 2600**

City

**ATLANTA**

State

**GA**

Zip Code

**30328**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

**THRASHER LISS & SMITH LLC**

Occupation

**ATTORNEY**

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

**1000.00**

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2013        |

**Transaction ID : SA11AI.491**

Amount of Each Receipt this Period

**250.00**

Full Name (Last, First, Middle Initial)

**CONNELL STAFFORD JR.**Mailing Address **3920 CLUB DRIVE**

City

**ATLANTA**

State

**GA**

Zip Code

**30407**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

**TROUTMAN SANDERS LLP**

Occupation

**GOVERNMENT AFFAIRS**

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

**250.00**

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2013        |

**Transaction ID : SA11AI.487**

Amount of Each Receipt this Period

**250.00**

Full Name (Last, First, Middle Initial)

**ERIC TANENBLATT**Mailing Address **1000 FOXCROFT ROAD**

City

**ATLANTA**

State

**GA**

Zip Code

**30327**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

**MCKENNA LONG & ALDRIDGE**

Occupation

**GOVERNMENT AFFAIRS**

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

**2000.00**

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2013        |

**Transaction ID : SA11AI.499**

Amount of Each Receipt this Period

**1000.00****SUBTOTAL** of Receipts This Page (optional).....**1500.00****TOTAL** This Period (last page this line number only).....

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

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

FOR LINE NUMBER:

PAGE 32 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

LINDSEY FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

A. MARC A TAYLOR

 Mailing Address 1600 PARKWOOD CIRCLE SE  
 SUITE 400

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30339    |

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

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 08    |   | 2013      |

Transaction ID : SA11AI.391

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. ALVIN TOWNLEY JR

Mailing Address 350 WHEATRIDGE DRIVE

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ROSWELL | GA    | 30075    |

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 TOWNLEY KENTON, INC

 Occupation  
 INDEPENDENT INSURANCE AGENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 18    |   | 2013      |

Transaction ID : SA11AI.435

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. JAMES E TUDOR

Mailing Address PO BOX 64

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| NEWBORN | GA    | 30056    |

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 GA ASSOCIATION OF CONVENIENCE STORE

 Occupation  
 PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 27    |   | 2013      |

Transaction ID : SA11AI.515

Amount of Each Receipt this Period

250.00

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

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

750.00



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

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

FOR LINE NUMBER:

PAGE 33 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

LINDSEY FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

LEE T WALLACE

A.

Mailing Address 3183 ARGONNE DRIVE

City

ATLANTA

State

GA

Zip Code

30305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE WALLACE LAW FIRM

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 27    |   | 2013      |

Transaction ID : SA11AI.512

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

LISA WARGO

B.

Mailing Address 4422 E. BROOKHAVEN DRIVE

City

ATLANTA

State

GA

Zip Code

30319

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 23    |   | 2013      |

Transaction ID : SA11AI.436

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

WILEY A WASDEN III

C.

Mailing Address 209 FIDDLERS BEND

City

SAVANNAH

State

GA

Zip Code

31406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BRENNAN &amp; WASDEN

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 27    |   | 2013      |

Transaction ID : SA11AI.501

Amount of Each Receipt this Period

250.00

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

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

1000.00

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

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

FOR LINE NUMBER:

PAGE 34 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

LINDSEY FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

JOSEPH WATKINS

A.

Mailing Address 5985 RIVERWOOD DRIVE

City

ATLANTA

State

GA

Zip Code

30328

FEC ID number of contributing federal political committee.

C

Name of Employer

WATKINS, LOURIE, ROLL &amp; CHANCE, PC

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 01    |   | 2013        |

Transaction ID : SA11AI.112

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

PAUL WEATHINGTON

B.

Mailing Address 191 PEACHTREE STREET NE  
SUITE 3900

City

ATLANTA

State

GA

Zip Code

30303

FEC ID number of contributing federal political committee.

C

Name of Employer

WEATHINGTON SMITH PC

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 27    |   | 2013        |

Transaction ID : SA11AI.517

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MEREDITH M WEAVER

C.

Mailing Address 1109 ANGELO COURT

City

ATLANTA

State

GA

Zip Code

30319

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF

Occupation

GOVERNMENT AFFAIRS

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2013        |

Transaction ID : SA11AI.494

Amount of Each Receipt this Period

500.00

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

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

1250.00

|   |     |  |     |  |     |  |     |  |    |
|---|-----|--|-----|--|-----|--|-----|--|----|
| ✕ | 11a |  | 11b |  | 11c |  | 11d |  |    |
|   | 12  |  | 13a |  | 13b |  | 14  |  | 15 |

NAME OF COMMITTEE (In Full)  
LINDSEY FOR CONGRESS INC

A diagram of a rectangular frame structure. It consists of two horizontal bars at the top and bottom, and ten vertical bars connecting them. The vertical bars are evenly spaced along the horizontal bars.

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

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

FOR LINE NUMBER: PAGE 36 OF 67  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**LINDSEY FOR CONGRESS INC**

|   |       |                                  |  |  |
|---|-------|----------------------------------|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>SALLY WILLIAMSON</b>  |       |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>08 / 09 / 2013 |  |
| Mailing Address 655 ANDOVER DRIVE   |       |                                  | <b>Transaction ID : SA11AI.361</b>                       |  |
| City  | State | Zip Code                         |  |  |
| ATLANTA   | GA    | 30327                            |  |  |
| FEC ID number of contributing federal political committee.  |       | C                                | Amount of Each Receipt this Period<br>500.00             |  |
| Name of Employer<br>SW&A  |       | Occupation<br>EXECUTIVE COACH    |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |       | Election Cycle-to-Date<br>500.00 |  |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>ROBERT F WILLIS III</b>   |       |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>09 / 20 / 2013 |  |
| Mailing Address 29 GOLF CIRCLE  |       |                                  | <b>Transaction ID : SA11AI.493</b>                       |  |
| City  | State | Zip Code                         |  |  |
| ATLANTA   | GA    | 30309                            |  |  |
| FEC ID number of contributing federal political committee.  |       | C                                | Amount of Each Receipt this Period<br>250.00             |  |
| Name of Employer<br>TROUTMAN SANDERS LLP  |       | Occupation<br>GOVERNMENT AFFAIRS |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |       | Election Cycle-to-Date<br>250.00 |  |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>JOHN P WILSON III</b>   |       |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>08 / 14 / 2013 |  |
| Mailing Address 2490 PIEDMONT ROAD NE<br>SUITE 1150   |       |                                  | <b>Transaction ID : SA11AI.375</b>                       |  |
| City  | State | Zip Code                         |  |  |
| ATLANTA   | GA    | 30305                            |  |  |
| FEC ID number of contributing federal political committee.  |       | C                                | Amount of Each Receipt this Period<br>250.00             |  |
| Name of Employer<br>LEVINE, SMITH, SNIDER & WILSON, LLC   |       | Occupation<br>ATTORNEY           |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |       | Election Cycle-to-Date<br>250.00 |  |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....   |       |                                  | 1000.00  |  |
| <b>TOTAL</b> This Period (last page this line number only).....   |       |                                  |  |  |

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

FOR LINE NUMBER:

PAGE 37 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**CHARLIE YATES****A.**

Mailing Address 5270 WOODRIDGE FOREST TRAIL

City

ATLANTA

State

GA

Zip Code

30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 10  |   | 2013    |

Transaction ID : SA11AI.412

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | 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).....

500.00

48973.84

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

PAGE 38 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**COMMITTEE TO ELECT ANDY WELCH, INC.****A.**

Mailing Address PO BOX 2871

City

MCDONOUGH

State

GA

Zip Code

30253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 05    | / | 2013        |

**Transaction ID : SA11C.418**

Amount of Each Receipt this Period

500.00

PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)

**COMMITTEE TO ELECT BUTCH PARRISH****B.**

Mailing Address 224 W MAIN STREET

City

SWAINSBORO

State

GA

Zip Code

30401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    | / | 08    | / | 2013        |

**Transaction ID : SA11C.381**

Amount of Each Receipt this Period

250.00

PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)

**FRIENDS OF HARRY GEISINGER****C.**

Mailing Address 224 RIVERVIEW TRAIL

City

ROSWELL

State

GA

Zip Code

30075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    | / | 09    | / | 2013        |

**Transaction ID : SA11C.377**

Amount of Each Receipt this Period

250.00

PERMISSIBLE FUNDS

**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:  
(check only one)

PAGE 39 OF 67

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

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NAME OF COMMITTEE (In Full)  
**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**ROYAL FOR REPRESENTATIVE (A. RICHARD)**

Mailing Address PO BOX 607

City State Zip Code  
CAMILLA GA 31730

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M / D D / Y Y Y Y  
09 20 2013

Transaction ID : SA11C.486

Amount of Each Receipt this Period

200.00

PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)

**B.**  
Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**  
Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / 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

1200.00

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

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

FOR LINE NUMBER:

PAGE 40 OF 67

(check only one)

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

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NAME OF COMMITTEE (In Full)

LINDSEY FOR CONGRESS INC

Full Name (Last, First, Middle Initial)

EDWARD LINDSEY

A.

Mailing Address 1150 ANGELO COURT

City

ATLANTA

State

GA

Zip Code

30319

FEC ID number of contributing  
federal political committee.

C H4GA11079

Name of Employer

GOODMAN MCGUFFEY LINDSEY &amp; JOHNSON

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35050.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 30    | / | 2013        |

Transaction ID : SA13A.534

Amount of Each Receipt this Period

20000.00

LOAN FROM CANDIDATE

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

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

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

20000.00

20000.00



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

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. ADVERTISING DYNAMICS, INC.**Mailing Address 104 EAST SIXTH AVENUE  
PO BOX 1345

City ROME State GA Zip Code 30162

Purpose of Disbursement  
2-PG FEATURE ARTICLE IN FALL 2013 ISSUE OF ENJOY! CHEROKEE  
MAGAZINE

Candidate Name

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

State: District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 08  | 29  | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2700.00 |
|---------|

Transaction ID : SB17.397

**B. AROUNDBOUT LOCAL MEDIA, INC.**Mailing Address THE TOWNELAKER--AROUNDWALTON  
2449 TOWNE LAKE PKWY

City WOODSTOCK State GA Zip Code 30189

Purpose of Disbursement  
COVER FEATURES 6/2014 & 7/2014

Candidate Name

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

State: District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 08  | 2013    |

Amount of Each Disbursement this Period

|          |
|----------|
| 11598.00 |
|----------|

Transaction ID : SB17.311

**C. CARTERSVILLE-BARTOW COUNTY CHAMBER**Mailing Address PO BOX 307  
122 WEST MAIN STREET

City CARTERSVILLE State GA Zip Code 30120

Purpose of Disbursement  
NEW MEMBERSHIP DUES

Candidate Name

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

State: District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 22  | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 220.00 |
|--------|

Transaction ID : SB17.339

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

|          |
|----------|
| 14518.00 |
|----------|

|  |
|--|
|  |
|--|

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

PAGE 42 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. FREDERICK E COOPER**

Mailing Address PO BOX 52367

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30355    |

Purpose of Disbursement  
IN-KIND: 9/18/13 FUNDRAISER EXPENSE (THE CAPITAL GRILLE)

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:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 23  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 311.92 |
|--------|

Transaction ID : SB17.424

**B. ELECTEKUSA**

Mailing Address PO BOX 23715

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| CHAGRIN FALLS | OH    | 44023    |

Purpose of Disbursement  
CAMPAIGN SOFTWARE USAGE

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:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 16  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 800.00 |
|--------|

Transaction ID : SB17.362

**C. ELECTEKUSA**

Mailing Address PO BOX 23715

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| CHAGRIN FALLS | OH    | 44023    |

Purpose of Disbursement  
CAMPAIGN SOFTWARE USAGE

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:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 13  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 800.00 |
|--------|

Transaction ID : SB17.541

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

1911.92

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

PAGE 43 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. HARWELL PHOTOGRAPHY**

Mailing Address 873 COUNTY LINE CHURCH ROAD

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| GRIFFIN | GA    | 30223    |

Purpose of Disbursement  
FULL DAY + OFFICE PHOTO SHOOT

Candidate Name

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

State: District:

|                   |  |                                  |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary         | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) |                                  |

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 08 / 07 / 2013      |

Amount of Each Disbursement this Period

|         |
|---------|
| 2140.00 |
|---------|

Transaction ID : SB17.356

**B. HYNES COMMUNICATIONS LLC**Mailing Address 121 BOW STREET  
SUITE 6

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| PORTSMOUTH | NH    | 03801    |

Purpose of Disbursement  
MEDIA CONSULTING & ONLINE SERVICES SEPT 2013

Candidate Name

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

State: District:

|                   |  |                                  |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary         | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) |                                  |

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 09 / 16 / 2013      |

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Transaction ID : SB17.549

**C. HYNES COMMUNICATIONS LLC**Mailing Address 121 BOW STREET  
SUITE 6

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| PORTSMOUTH | NH    | 03801    |

Purpose of Disbursement  
MEDIA CONSULTING & ONLINE SERVICES AUG 7-30, 2013

Candidate Name

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

State: District:

|                   |  |                                  |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary         | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) |                                  |

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 09 / 27 / 2013      |

Amount of Each Disbursement this Period

|         |
|---------|
| 3750.00 |
|---------|

Transaction ID : SB17.546

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

10890.00

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

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. EDWARD LINDSEY**

Mailing Address 1150 ANGELO COURT

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30319    |

Purpose of Disbursement  
CAMPAIGN EXPENSE REIMBURSEMENTS

Candidate Name

**EDWARD LINDSEY**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: GA District: 11

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 12  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1438.72 |
|---------|

Transaction ID : SB17.316

**B. FACEBOOK ADVERTISING USA**Mailing Address 1601 WILLOW ROAD  
BLDG 10

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| MENLO PARK | CA    | 94025    |

Purpose of Disbursement  
ADVERTISING 4/11-7/2/13

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 02  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 977.03 |
|--------|

Transaction ID : SB17.317

[MEMO ITEM]

**C. COBB CHAMBER OF COMMERCE**

Mailing Address PO BOX 671868

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| MARIETTA | GA    | 30006    |

Purpose of Disbursement  
COBB CHAMBER BREAKFAST

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 17  |   | 2013    |

Amount of Each Disbursement this Period

|       |
|-------|
| 25.00 |
|-------|

Transaction ID : SB17.321

[MEMO ITEM]

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

1438.72

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

PAGE 45 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. EDWARD LINDSEY**

Mailing Address 1150 ANGELO COURT

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30319    |

Purpose of Disbursement  
REIMB OF CAMPAIGN EXPENSES 7/19--8/2/13

Candidate Name

**EDWARD LINDSEY**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: GA District: 11

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 16  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2167.66 |
|---------|

Transaction ID : SB17.365

**B. FACEBOOK ADVERTISING USA**Mailing Address 1601 WILLOW ROAD  
BLDG 10

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| MENLO PARK | CA    | 94025    |

Purpose of Disbursement  
ADVERTISEMENT 7/7--7/23/13.

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 16  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 269.13 |
|--------|

Transaction ID : SB17.366

[MEMO ITEM]

**C. DELTA AIRLINES**

Mailing Address PO BOX 20706

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30320    |

Purpose of Disbursement  
TWO FLIGHTS TO WASH., DC FOR CAMPAIGN MEETINGS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 16  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1323.60 |
|---------|

Transaction ID : SB17.368

[MEMO ITEM]

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

2167.66

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

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. COBB CHAMBER OF COMMERCE**

Mailing Address PO BOX 671868

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| MARIETTA | GA    | 30006    |

Purpose of Disbursement  
BREAKFAST MEETING

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:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 16  |   | 2013    |

Amount of Each Disbursement this Period

|       |
|-------|
| 25.00 |
|-------|

Transaction ID : SB17.370

[MEMO ITEM]

**B. CREATSEND.COM EMAIL**Mailing Address SUITE 404, 3-5 STAPLETON AVENUE  
SUTHERLAND

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| AUSTRALIA |       | 2232     |

Purpose of Disbursement  
NEWSLETTERS 7/3--7/19/13

004

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:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 16  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 111.42 |
|--------|

Transaction ID : SB17.371

[MEMO ITEM]

**C. EDWARD LINDSEY**

Mailing Address 1150 ANGELO COURT

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30319    |

Purpose of Disbursement  
CAMPAIGN EXPENSE REIMBURSEMENT AUGUST 2013

007

Candidate Name

**EDWARD LINDSEY**

|                |   |
|----------------|---|
| Office Sought: | <input checked="" 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: GA District: 11

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 30  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 150.12 |
|--------|

Transaction ID : SB17.547

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

150.12

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

PAGE 47 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. NEW SOUTH PERSPECTIVE LLC**Mailing Address 250 10TH STREET NE  
APT 1207

City ATLANTA State GA Zip Code 30309

Purpose of Disbursement  
EVENT PLANNING & SCHEDULING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 12  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 925.00 |
|--------|

Transaction ID : SB17.324

**B. NEW SOUTH PERSPECTIVE LLC**Mailing Address 250 10TH STREET NE  
APT 1207

City ATLANTA State GA Zip Code 30309

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 12  |   | 2013    |

Amount of Each Disbursement this Period

|       |
|-------|
| 58.00 |
|-------|

Transaction ID : SB17.557

**C. NEW SOUTH PERSPECTIVE LLC**Mailing Address 250 10TH STREET NE  
APT 1207

City ATLANTA State GA Zip Code 30309

Purpose of Disbursement  
EVENT PLANNING & SCHEDULING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 01  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 743.75 |
|--------|

Transaction ID : SB17.344

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

1726.75

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

PAGE 48 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. NEW SOUTH PERSPECTIVE LLC**Mailing Address 250 10TH STREET NE  
APT 1207

City ATLANTA State GA Zip Code 30309

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 01  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 683.00 |
|--------|

Transaction ID : SB17.555

**B. NEW SOUTH PERSPECTIVE LLC**Mailing Address 250 10TH STREET NE  
APT 1207

City ATLANTA State GA Zip Code 30309

Purpose of Disbursement  
EVENT PLANNING & SCHEDULING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 16  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 268.75 |
|--------|

Transaction ID : SB17.363

**C. NEW SOUTH PERSPECTIVE LLC**Mailing Address 250 10TH STREET NE  
APT 1207

City ATLANTA State GA Zip Code 30309

Purpose of Disbursement  
EVENT PLANNING & SCHEDULING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 30  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 356.25 |
|--------|

Transaction ID : SB17.548

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

683.00



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

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. NEW SOUTH PERSPECTIVE LLC**Mailing Address 250 10TH STREET NE  
APT 1207

City ATLANTA State GA Zip Code 30309

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 30  |   | 2013    |

Amount of Each Disbursement this Period

|      |
|------|
| 9.30 |
|------|

Transaction ID : SB17.553

**B. NEW SOUTH PERSPECTIVE LLC**Mailing Address 250 10TH STREET NE  
APT 1207

City ATLANTA State GA Zip Code 30309

Purpose of Disbursement  
EVENT PLANNING & SCHEDULING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 13  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 125.00 |
|--------|

Transaction ID : SB17.542

**C. PARLAY POLITICAL, LLC**

Mailing Address PO BOX 1386

City ATHENS State GA Zip Code 30603

Purpose of Disbursement  
INITIAL BOOKKEEPING SERVICES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 22  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Transaction ID : SB17.341

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

2134.30

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

PAGE 50 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. PARLAY POLITICAL, LLC**

Mailing Address PO BOX 1386

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| ATHENS | GA    | 30603    |

Purpose of Disbursement  
CAMPAIGN BOOKKEEPING

001

Candidate Name

|                |           |
|----------------|-----------|
| Office Sought: | House     |
|                | Senate    |
|                | President |

Disbursement For:

|  |                                  |
|--|----------------------------------|
| <input type="checkbox"/> Primary         | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) |                                  |

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 22  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Transaction ID : SB17.342

**B. PARLAY POLITICAL, LLC**

Mailing Address PO BOX 1386

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| ATHENS | GA    | 30603    |

Purpose of Disbursement  
POLITICAL CONSULTING

001

Candidate Name

|                |           |
|----------------|-----------|
| Office Sought: | House     |
|                | Senate    |
|                | President |

Disbursement For:

|  |                                  |
|--|----------------------------------|
| <input type="checkbox"/> Primary         | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) |                                  |

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 22  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Transaction ID : SB17.343

**C. PARLAY POLITICAL, LLC**

Mailing Address PO BOX 1386

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| ATHENS | GA    | 30603    |

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

001

Candidate Name

|                |           |
|----------------|-----------|
| Office Sought: | House     |
|                | Senate    |
|                | President |

Disbursement For:

|  |                                  |
|--|----------------------------------|
| <input type="checkbox"/> Primary         | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) |                                  |

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 16  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 800.00 |
|--------|

Transaction ID : SB17.364

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

6800.00

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

PAGE 51 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. ELECTEKUSA**

Mailing Address PO BOX 23715

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| CHAGRIN FALLS | OH    | 44023    |

Purpose of Disbursement  
CAMPAIGN SOFTWARE USAGE

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 08 / 16 / 2013      |

Amount of Each Disbursement this Period

|        |
|--------|
| 800.00 |
|--------|

Transaction ID : SB17.562

[MEMO ITEM]

**B. PARLAY POLITICAL, LLC**

Mailing Address PO BOX 1386

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| ATHENS | GA    | 30603    |

Purpose of Disbursement  
CAMPAIGN BOOKKEEPING

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 08 / 29 / 2013      |

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Transaction ID : SB17.396

**C. PARLAY POLITICAL, LLC**

Mailing Address PO BOX 1386

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| ATHENS | GA    | 30603    |

Purpose of Disbursement  
CAMPAIGN BOOKKEEPING

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:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 09 / 27 / 2013      |

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Transaction ID : SB17.544

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

2000.00

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

PAGE 52 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. PLP ENTERPRISES, INC.**

Mailing Address 3452 ESSEX AVENUE

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30339    |

Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 08  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 3000.00 |
|---------|

Transaction ID : SB17.313

**B. PLP ENTERPRISES, INC.**

Mailing Address 3452 ESSEX AVENUE

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30339    |

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 08  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1731.09 |
|---------|

Transaction ID : SB17.314

**C. THE BUCKHEAD CLUB**Mailing Address 3344 PEACHTREE ROAD  
SUITE 2600

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30326    |

Purpose of Disbursement  
EXPENSES FOR FUNDRAISER IN BUCKHEAD

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 08  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1731.09 |
|---------|

Transaction ID : SB17.315

[MEMO ITEM]

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

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

4731.09

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

PAGE 53 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. PLP ENTERPRISES, INC.**

Mailing Address 3452 ESSEX AVENUE

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30339    |

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 01  |   | 2013    |

Amount of Each Disbursement this Period

|       |
|-------|
| 99.59 |
|-------|

Transaction ID : SB17.346

**B. PLP ENTERPRISES, INC.**

Mailing Address 3452 ESSEX AVENUE

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30339    |

Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 02  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 3000.00 |
|---------|

Transaction ID : SB17.354

**C. PLP ENTERPRISES, INC.**

Mailing Address 3452 ESSEX AVENUE

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30339    |

Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 13  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 3000.00 |
|---------|

Transaction ID : SB17.540

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

6099.59

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

PAGE 54 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. POLITICAL LAW GROUP, A CHALMERS LLC**Mailing Address 5805 STATE BRIDGE ROAD  
SUITE G77City State Zip Code  
JOHNS CREEK GA 30097Purpose of Disbursement  
LEGAL SERVICES TO CAMPAIGN

Candidate Name

|                |           |   |
|----------------|-----------|---|
| Office Sought: | House     | Disbursement For:   |
|                | Senate    |   |
|                | President |   |
| State:         | District: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
|                |           | <input type="checkbox"/> Other (specify)                          |

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 01  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Transaction ID : SB17.355

**B. THE STONERIDGE GROUP, LLC**Mailing Address 4400 NORTH POINT PARKWAY  
SUITE 190City State Zip Code  
ALPHARETTA GA 30022Purpose of Disbursement  
RETAINER & AD BUY

Candidate Name

|                |           |   |
|----------------|-----------|---|
| Office Sought: | House     | Disbursement For:   |
|                | Senate    |   |
|                | President |   |
| State:         | District: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
|                |           | <input type="checkbox"/> Other (specify)                          |

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 07  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Transaction ID : SB17.359

**C. THE STONERIDGE GROUP, LLC**Mailing Address 4400 NORTH POINT PARKWAY  
SUITE 190City State Zip Code  
ALPHARETTA GA 30022Purpose of Disbursement  
SEPT MEDIA & EMAIL SVCS

Candidate Name

|                |           |   |
|----------------|-----------|---|
| Office Sought: | House     | Disbursement For:   |
|                | Senate    |   |
|                | President |   |
| State:         | District: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
|                |           | <input type="checkbox"/> Other (specify)                          |

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 16  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2725.00 |
|---------|

Transaction ID : SB17.550

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

7725.00

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

PAGE 55 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. THE STONERIDGE GROUP, LLC**Mailing Address 4400 NORTH POINT PARKWAY  
SUITE 190

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement  
MEN'S T-SHIRTS

Candidate Name

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

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 16  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 543.50 |
|--------|

Transaction ID : SB17.551

**B. JOSEPH B WILKINSON JR**Mailing Address 200 RIVER VISTA DRIVE  
UNIT 203

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement  
IN-KIND: 9/18/13 FUNDRAISER EXPENSE (THE CAPITAL GRILLE)

Candidate Name

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

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 23  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 311.92 |
|--------|

Transaction ID : SB17.426

**C. POLITICAL LAW GROUP, A CHALMERS LLC**Mailing Address 5805 STATE BRIDGE ROAD  
SUITE G77

City JOHNS CREEK State GA Zip Code 30097

Purpose of Disbursement  
LEGAL SERVICES TO CAMPAIGN & EXPENSE REIMBURSEMENT

Candidate Name

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

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 12  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2976.00 |
|---------|

Transaction ID : SB17.323

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

3831.42

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

PAGE 56 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. THE STONERIDGE GROUP, LLC**Mailing Address 4400 NORTH POINT PARKWAY  
SUITE 190

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement  
LADIES & MEN'S T-SHIRTS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 12  |   | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1251.00 |
|---------|

Transaction ID : SB17.332

**B. THE STONERIDGE GROUP, LLC**Mailing Address 4400 NORTH POINT PKWY  
SUITE 190

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement  
WEBSITE DESIGN

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 12  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 350.00 |
|--------|

Transaction ID : SB17.325

**C. THE STONERIDGE GROUP, LLC**Mailing Address 4400 NORTH POINT PKWY  
SUITE 190

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement  
DOMAIN NAME REGISTRATION (2 YRS, EDLINDSEY.US)

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 12  |   | 2013    |

Amount of Each Disbursement this Period

|       |
|-------|
| 26.00 |
|-------|

Transaction ID : SB17.326

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

1627.00



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

PAGE 57 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. THE STONERIDGE GROUP, LLC**Mailing Address 4400 NORTH POINT PKWY  
SUITE 190

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement  
DESIGN, SHIPPING FOR STICKERS

Candidate Name

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

State: District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 12  | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 886.44 |
|--------|

Transaction ID : SB17.327

**B. THE STONERIDGE GROUP, LLC**Mailing Address 4400 NORTH POINT PKWY  
SUITE 190

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement  
YARD SIGNS, SHIPPING

Candidate Name

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

State: District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 12  | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 3558.00 |
|---------|

Transaction ID : SB17.328

**C. THE STONERIDGE GROUP, LLC**Mailing Address 4400 NORTH POINT PKWY  
SUITE 190

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement  
WEBSITE EMAIL SVCS

Candidate Name

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

State: District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 12  | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 125.00 |
|--------|

Transaction ID : SB17.329

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

4569.44

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

PAGE 58 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. THE STONERIDGE GROUP, LLC**Mailing Address 4400 NORTH POINT PKWY  
SUITE 190

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement  
THANK-YOU CARDS/ENVELOPES, SHIPPING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 12  | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 511.56 |
|--------|

Transaction ID : SB17.330

**B. THE STONERIDGE GROUP, LLC**Mailing Address 4400 NORTH POINT PKWY  
SUITE 190

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement  
DESIGN, SHIPPING: LETTERHEAD, ENVELOPES & BUSINESS CARDS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 12  | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 934.59 |
|--------|

Transaction ID : SB17.331

**C. THE STONERIDGE GROUP, LLC**Mailing Address 4400 NORTH POINT PKWY  
SUITE 190

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement  
HANDOUTS, SHIPPING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 12  | 2013    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1342.51 |
|---------|

Transaction ID : SB17.333

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

2788.66

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

PAGE 59 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. THE STONERIDGE GROUP, LLC**Mailing Address 4400 NORTH POINT PKWY  
SUITE 190

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement  
LAYOUT/DESIGN OF PROGRAM AD

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 12  | 2013    |

Amount of Each Disbursement this Period

|        |       |
|--------|-------|
| 400.00 | 50.00 |
|--------|-------|

Transaction ID : SB17.334

**B. THE STONERIDGE GROUP, LLC**Mailing Address 4400 NORTH POINT PKWY  
SUITE 190

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement  
BANNER W/GROMMETS, SHIPPING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 12  | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 354.19 |
|--------|

Transaction ID : SB17.335

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
|     |     |         |

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

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

404.19

76196.86

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

PAGE 60 OF 67

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

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NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

**A. COMMITTEE TO ELECT ALLEN PEAKE**

Mailing Address 103 COLONY COURT

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 29  |   | 2013    |

|       |       |          |
|-------|-------|----------|
| City  | State | Zip Code |
| MACON | GA    | 31210    |

Amount of Each Disbursement this Period

|        |
|--------|
| 500.00 |
|--------|

Purpose of Disbursement  
REFUND

010

Transaction ID : SB20C.405

Candidate Name

**COMMITTEE TO ELECT ALLEN PEAKE**Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2014

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. COMMITTEE TO ELECT JOHN D MEADOWS III**

Mailing Address PO BOX 1255

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 29  |   | 2013    |

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| CALHOUN | GA    | 30703    |

Amount of Each Disbursement this Period

|        |
|--------|
| 750.00 |
|--------|

Purpose of Disbursement  
REFUND

010

Transaction ID : SB20C.398

Candidate Name

**COMMITTEE TO ELECT JOHN D MEADOWS III**Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2014

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. COMMITTEE TO ELECT RICHARD SMITH**

Mailing Address PO BOX 2122

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 29  |   | 2013    |

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| COLUMBUS | GA    | 31902    |

Amount of Each Disbursement this Period

|        |
|--------|
| 666.00 |
|--------|

Purpose of Disbursement  
REFUND

010

Transaction ID : SB20C.404

Candidate Name

**COMMITTEE TO ELECT RICHARD SMITH**Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2014

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

State:

District:

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

1916.00

1916.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 61 OF 67

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.289

LINDSEY FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

EDWARD LINDSEY

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1150 ANGELO COURT

City

State

ZIP Code

ATLANTA

GA

30319

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 30 / 2013

Date Due

M M / D D / Y Y Y Y  
12/31/2014

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

10000.00

**TOTALS** This Period (last page in this line only)..... ►

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 62 OF 67

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.290

LINDSEY FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

EDWARD LINDSEY

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1150 ANGELO COURT

City

State

ZIP Code

ATLANTA

GA

30319

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 30 / 2013

Date Due

M M / D D / Y Y Y Y  
12/31/2014

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

**TOTALS** This Period (last page in this line only)..... ►

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 63 OF 67

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.534

LINDSEY FOR CONGRESS INC

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

EDWARD LINDSEY

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1150 ANGELO COURT

City

State

ZIP Code

ATLANTA

GA

30319

Original Amount of Loan

20000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 30 / 2013

Date Due

M M / D D / Y Y Y Y  
/ / 12/31/2014

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

20000.00

**TOTALS** This Period (last page in this line only)..... ►

35000.00

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 64 OF 67

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**POLITICAL LAW GROUP, A CHALMERS LLC**

Nature of Debt (Purpose):

LEGAL ASSISTANCE W/CAMPAIGN

Mailing Address 5805 STATE BRIDGE ROAD  
SUITE G77

City State

Zip Code

JOHNS CREEK

GA

30097

Outstanding Balance Beginning This Period

2976.00

Transaction ID : SD10.1

Amount Incurred This Period

0.00

Payment This Period

2976.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE STONERIDGE GROUP, LLC**

Nature of Debt (Purpose):

CAMPAIGN MARKETING

Mailing Address 4400 NORTH POINT PKWY  
SUITE 190

City State

Zip Code

ALPHARETTA

GA

30022

Outstanding Balance Beginning This Period

350.00

Transaction ID : SD10.2

Amount Incurred This Period

0.00

Payment This Period

350.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE STONERIDGE GROUP, LLC**

Nature of Debt (Purpose):

DOMAIN REGISTRATION

Mailing Address 4400 NORTH POINT PKWY  
SUITE 190

City State

Zip Code

ALPHARETTA

GA

30022

Outstanding Balance Beginning This Period

26.00

Transaction ID : SD10.3

Amount Incurred This Period

0.00

Payment This Period

26.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

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



**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 65 OF 67

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE STONERIDGE GROUP, LLC**Nature of Debt (Purpose):  
CAMPAIGN STICKERSMailing Address 4400 NORTH POINT PKWY  
SUITE 190City State Zip Code  
ALPHARETTA GA 30022

Outstanding Balance Beginning This Period

886.44

Transaction ID : SD10.4

Amount Incurred This Period

0.00

Payment This Period

886.44

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE STONERIDGE GROUP, LLC**Nature of Debt (Purpose):  
YARD SIGNSMailing Address 4400 NORTH POINT PKWY  
SUITE 190City State Zip Code  
ALPHARETTA GA 30022

Outstanding Balance Beginning This Period

3558.00

Transaction ID : SD10.5

Amount Incurred This Period

0.00

Payment This Period

3558.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE STONERIDGE GROUP, LLC**Nature of Debt (Purpose):  
EMAIL TEMPLATE (WEB SITE)Mailing Address 4400 NORTH POINT PKWY  
SUITE 190City State Zip Code  
ALPHARETTA GA 30022

Outstanding Balance Beginning This Period

125.00

Transaction ID : SD10.6

Amount Incurred This Period

0.00

Payment This Period

125.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 66 OF 67

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE STONERIDGE GROUP, LLC**

Nature of Debt (Purpose):

THANK-YOU CARDS/ENVELOPES

Mailing Address 4400 NORTH POINT PKWY  
SUITE 190City State Zip Code  
ALPHARETTA GA 30022

Outstanding Balance Beginning This Period

511.56

Transaction ID : SD10.7

Amount Incurred This Period

0.00

Payment This Period

511.56

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE STONERIDGE GROUP, LLC**

Nature of Debt (Purpose):

LAYOUT/DESIGN/PRINTING FOR  
LETTERHEADMailing Address 4400 NORTH POINT PKWY  
SUITE 190City State Zip Code  
ALPHARETTA GA 30022

Outstanding Balance Beginning This Period

934.59

Transaction ID : SD10.8

Amount Incurred This Period

0.00

Payment This Period

934.59

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE STONERIDGE GROUP, LLC**

Nature of Debt (Purpose):

T-SHIRTS

Mailing Address 4400 NORTH POINT PARKWAY  
SUITE 190City State Zip Code  
ALPHARETTA GA 30022

Outstanding Balance Beginning This Period

1251.00

Transaction ID : SD10.9

Amount Incurred This Period

0.00

Payment This Period

1251.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 67 OF 67

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**LINDSEY FOR CONGRESS INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE STONERIDGE GROUP, LLC**Nature of Debt (Purpose):  
**HANDOUT CARDS**Mailing Address 4400 NORTH POINT PKWY  
SUITE 190City State Zip Code  
ALPHARETTA GA 30022

Outstanding Balance Beginning This Period

1342.51

**Transaction ID : SD10.11**

Amount Incurred This Period

0.00

Payment This Period

1342.51

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE STONERIDGE GROUP, LLC**Nature of Debt (Purpose):  
**PROGRAM AD**Mailing Address 4400 NORTH POINT PKWY  
SUITE 190City State Zip Code  
ALPHARETTA GA 30022

Outstanding Balance Beginning This Period

50.00

**Transaction ID : SD10.12**

Amount Incurred This Period

0.00

Payment This Period

50.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE STONERIDGE GROUP, LLC**Nature of Debt (Purpose):  
**BANNER**Mailing Address 4400 NORTH POINT PKWY  
SUITE 190City State Zip Code  
ALPHARETTA GA 30022

Outstanding Balance Beginning This Period

354.19

**Transaction ID : SD10.13**

Amount Incurred This Period

0.00

Payment This Period

354.19

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

2) **TOTALS** This Period (last page this line number only) ..... ▶

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶