

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2015"/> | <input type="text" value="55401.04"/> | <input type="text" value="55401.04"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="62557.27"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="42225.00"/> | <input type="text" value="63675.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="104782.27"/> | <input type="text" value="119076.04"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="19313.77"/> | <input type="text" value="33607.54"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="85468.50"/> | <input type="text" value="85468.50"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

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

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 36825.00 | 57825.00 |
| (ii) Unitemized | 5400.00 | 5850.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 42225.00 | 63675.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 42225.00 | 63675.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 42225.00 | 63675.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 42225.00 | 63675.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 18500.00 | 32500.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements | 813.77 | 1107.54 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 19313.77 | 33607.54 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 19313.77 | 33607.54 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 42225.00 | 63675.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 42225.00 | 63675.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

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

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

FOR LINE NUMBER: PAGE 6 OF 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Furman Brodie
 Mailing Address 1214 Donvegan Road
 City State Zip Code
 Florence SC 29501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Charles Ingram Lumber Management
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2015
Transaction ID : SA11AI.4459
 Amount of Each Receipt this Period
 300.00

Full Name (Last, First, Middle Initial)
B. Bob Cook
 Mailing Address P O Box 2246
 City State Zip Code
 Lake City FL 32056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Great South Timber Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2015
Transaction ID : SA11AI.4461
 Amount of Each Receipt this Period
 1500.00

Full Name (Last, First, Middle Initial)
c. Chris deMilliano
 Mailing Address 1405 Southwood Drive
 City State Zip Code
 Huntsville TX 77340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Steely Lumber Company Operations Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2015
Transaction ID : SA11AI.4433
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2800.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 20 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

A. Robert Dill
 Full Name (Last, First, Middle Initial)
 Mailing Address 4503 Woodland Corp Blvd #400
 City Tampa State FL Zip Code 33614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tampa International Forest Occupation Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 28 / 2015
Transaction ID : SA11AI.4438
 Amount of Each Receipt this Period 400.00

B. Robert Dixon
 Full Name (Last, First, Middle Initial)
 Mailing Address 605 West Washington Street
 City Eufala State AL Zip Code 36027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer M C Dixon Lumber Company Occupation Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 07 / 10 / 2015
Transaction ID : SA11AI.4418
 Amount of Each Receipt this Period 2400.00

C. Frank Faircloth
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 5090
 City Cross City State FL Zip Code 32628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Suwannee Lumber Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 28 / 2015
Transaction ID : SA11AI.4436
 Amount of Each Receipt this Period 500.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3300.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 20 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Ben Garrison

Mailing Address P O B 626

City Eufala State AL Zip Code 36027

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

Name of Employer Garrison Bros Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2015

Transaction ID : SA11AI.4434

Amount of Each Receipt this Period
1000.00

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

Mailing Address P O Box 1663

City Mobile State AL Zip Code 36633

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

Name of Employer Scotch Gulf Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : SA11AI.4456

Amount of Each Receipt this Period
1200.00

Full Name (Last, First, Middle Initial)
C. James D Hankins

Mailing Address P O Box 517

City Ripley State MS Zip Code 38663

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

Name of Employer Hankins, Inc. Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2015

Transaction ID : SA11AI.4452

Amount of Each Receipt this Period
3000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5200.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 20 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Patrick Harrigan

Mailing Address 50 Morebriar Road

| | | |
|---------------------|-------------|-------------------|
| City Monroeville | State AL | Zip Code 36460 |
|---------------------|-------------|-------------------|

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

| | |
|-------------------------------------|--------------------------|
| Name of Employer Harrigan Lumber | Occupation Management |
|-------------------------------------|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 04 | / | 2015 |

Transaction ID : SA11AI.4447

Amount of Each Receipt this Period
1000.00

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

Mailing Address P O Box 206

| | | |
|----------------|-------------|-------------------|
| City Climax | State NC | Zip Code 27233 |
|----------------|-------------|-------------------|

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

| | |
|--|--------------------------|
| Name of Employer Industrial Wood Products | Occupation Management |
|--|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 01 | / | 2015 |

Transaction ID : SA11AI.4458

Amount of Each Receipt this Period
1500.00

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

Mailing Address P O Box 65

| | | |
|--------------------|-------------|-------------------|
| City Mt. Gilead | State NC | Zip Code 27306 |
|--------------------|-------------|-------------------|

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

| | |
|---|--------------------------|
| Name of Employer Jordan Lumber Company | Occupation Management |
|---|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 31 | / | 2015 |

Transaction ID : SA11AI.4443

Amount of Each Receipt this Period
5000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 7500.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 10 OF 20 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

| | | | |
|---|-------------------------------------|-------------------|--|
| Full Name (Last, First, Middle Initial) A. Sue Jordan | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 28 / 2015 |
| Mailing Address P O Box 98 | | | Transaction ID : SA11AI.4440 |
| City Mt. Gilead | State NC | Zip Code 27306 | Amount of Each Receipt this Period 2200.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Jordan Lumber | Occupation sales | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2200.00 | | |

| | | | |
|---|-------------------------------------|-------------------|--|
| Full Name (Last, First, Middle Initial) B. Josh Krauss | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 07 / 2015 |
| Mailing Address P O Box 23137 | | | Transaction ID : SA11AI.4450 |
| City Hot Springs | State AZ | Zip Code 71903 | Amount of Each Receipt this Period 1200.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Price LogPro | Occupation Manager | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1200.00 | | |

| | | | |
|---|-------------------------------------|-------------------|--|
| Full Name (Last, First, Middle Initial) C. Levi Pollard | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 09 / 2015 |
| Mailing Address 5863 Washington Road | | | Transaction ID : SA11AI.4417 |
| City Appling | State GA | Zip Code 30802 | Amount of Each Receipt this Period 1200.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Pollard Lumber | Occupation Management | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1200.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 4600.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 OF 20 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Chris Raybon

Mailing Address P O Box 22718

City Hot Springs State AZ Zip Code 71903

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

Name of Employer Baxley Equipment Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2015
Transaction ID : SA11AI.4429

Amount of Each Receipt this Period
 1200.00

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

Mailing Address P O Box 235

City New London State NC Zip Code 28127

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

Name of Employer H W Culp Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2015
Transaction ID : SA11AI.4423

Amount of Each Receipt this Period
 1200.00

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

Mailing Address P O Box 235

City New London State NC Zip Code 28127

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

Name of Employer H W Culp Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2015
Transaction ID : SA11AI.4460

Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2700.00

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

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 20 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

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

Mailing Address 2812 S. Cleveland Avenue

City State Zip Code
Russellville AR 72802

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

Name of Employer Occupation
Cone-Omega Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2015
Transaction ID : SA11AI.4422

Amount of Each Receipt this Period
300.00

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

Mailing Address P O Box 535

City State Zip Code
Allendale SC 29810

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

Name of Employer Occupation
Collums Lumber Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2015
Transaction ID : SA11AI.4416

Amount of Each Receipt this Period
2400.00

Full Name (Last, First, Middle Initial)
c. Mitch Shackelford

Mailing Address P O Box 1663

City State Zip Code
Mobile AL 36633

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

Name of Employer Occupation
Scotch Gulf Lumber Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2015
Transaction ID : SA11AI.4419

Amount of Each Receipt this Period
500.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3200.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 OF 20 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

| | | | |
|---|-------------------------------------|-------------------|---|
| Full Name (Last, First, Middle Initial) A. Ben Stimpson Jr. | | | Date of Receipt MM / DD / YYYY 08 / 05 / 2015 |
| Mailing Address PO Box 1663 | | | Transaction ID : SA11AI.4449 |
| City Mobil | State AL | Zip Code 36633 | Amount of Each Receipt this Period 1200.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Scotch Gulf Lumber | Occupation CEO | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1200.00 | | |

| | | | |
|---|------------------------------------|-------------------|---|
| Full Name (Last, First, Middle Initial) B. Maria Tarassoli | | | Date of Receipt MM / DD / YYYY 07 / 27 / 2015 |
| Mailing Address P O Box 29 | | | Transaction ID : SA11AI.4427 |
| City Trussville | State AL | Zip Code 35173 | Amount of Each Receipt this Period 850.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Progress Industries | Occupation sales | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 850.00 | | |

| | | | |
|---|-------------------------------------|-------------------|---|
| Full Name (Last, First, Middle Initial) C. Fred Taylor | | | Date of Receipt MM / DD / YYYY 07 / 18 / 2015 |
| Mailing Address 110 Leslie Street | | | Transaction ID : SA11AI.4421 |
| City Troy | State NC | Zip Code 27371 | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Troy Lumber Company | Occupation Management | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3050.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 20 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

| | | | |
|---|--------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) A. Fred Taylor | | | Date of Receipt |
| Mailing Address 110 Leslie Street | | | <input type="text" value="08"/> / <input type="text" value="04"/> / <input type="text" value="2015"/> |
| City | State | Zip Code | Transaction ID : SA11AI.4444 |
| Troy | NC | 27371 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="1200.00"/> |
| Name of Employer | Occupation | | |
| Troy Lumber Company | Management | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="2200.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) B. Fred Taylor | | | Date of Receipt |
| Mailing Address 110 Leslie Street | | | <input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2015"/> |
| City | State | Zip Code | Transaction ID : SA11AI.4453 |
| Troy | NC | 27371 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="300.00"/> |
| Name of Employer | Occupation | | |
| Troy Lumber Company | Management | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="2500.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) C. Charlie Thomas III | | | Date of Receipt |
| Mailing Address P O Box 98 | | | <input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2015"/> |
| City | State | Zip Code | Transaction ID : SA11AI.4432 |
| Shuqulak | MS | 39361 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="1000.00"/> |
| Name of Employer | Occupation | | |
| Shuqulak Lumber Company | CEO | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="2200.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="2500.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 OF 20 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

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

Mailing Address P O Box 68

City Shuqulak State MS Zip Code 39361

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

Name of Employer Shuqulak Lumber Occupation sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 27 / 2015

Transaction ID : SA11AI.4425

Amount of Each Receipt this Period
800.00

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

Mailing Address P O Box 160

City Huntland State TN Zip Code 37345

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

Name of Employer Thompson Appalachian Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 27 / 2015

Transaction ID : SA11AI.4454

Amount of Each Receipt this Period
575.00

C. Michael K Torrey
Full Name (Last, First, Middle Initial)

Mailing Address 1514 North Fillmore Street

City Arlington State VA Zip Code 22201

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

Name of Employer Michael Torrey & Associates Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2015

Transaction ID : SA11AI.4442

Amount of Each Receipt this Period
600.00

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1975.00 |
| TOTAL This Period (last page this line number only).....▶ | 36825.00 |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Bruce Westerman for Congress

Mailing Address 325 7th St NW
Suite 400

City Washington State DC Zip Code 20004

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: AZ District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09 | / | 10 | / | 2015 |

Transaction ID : SB23.4405

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

B. Butterfield for Congress

Mailing Address 434 FAYETTEVILLE STREET
SUITE 2020

City RALEIGH State NC Zip Code 27601

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NC District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07 | / | 28 | / | 2015 |

Transaction ID : SB23.4394

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

C. Kelly for Congress

Mailing Address P O Box 7092

City Tupelo State MS Zip Code 38802

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 31 | / | 2015 |

Transaction ID : SB23.4399

Amount of Each Disbursement this Period

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

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

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

| |
|---------|
| 3500.00 |
|---------|

| |
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| |
|--|

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Martha Roby for Congress

Mailing Address P O Box 195

City Montgomery State AL Zip Code 36101

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: AL District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 03 | | 2015 |

Transaction ID : SB23.4401

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

B. People for Patty Murray

Mailing Address 712 35th Ave

City Seattle State WA Zip Code 98122

Purpose of Disbursement

Candidate Name

People for Patty Murray

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 28 | | 2015 |

Transaction ID : SB23.4396

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

C. Sanford Bishop for Congress

Mailing Address 412 1st St SE
Suite 100

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 03 | | 2015 |

Transaction ID : SB23.4403

Amount of Each Disbursement this Period

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

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

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

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

| |
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| |
|--|

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. The Richard Burr Committee

Mailing Address P O Box 5928

City Winston-Salem State NC Zip Code 27113

Purpose of Disbursement

Candidate Name

The Richard Burr Committee

Office Sought: House
 Senate
 President
State: NC District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 08 / 2015

Transaction ID : SB23.4412

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. TIM SCOTT FOR SENATE

Mailing Address 1405 ASHLEY RIVER ROAD

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: SC District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SB23.4414

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. TIM SCOTT FOR SENATE

Mailing Address 1405 ASHLEY RIVER ROAD

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: SC District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SB23.4415

Amount of Each Disbursement this Period

5000.00

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

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

11000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Tom Rice for Congress

Mailing Address 516 N Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 09 | | 2015 |

Transaction ID : SB23.4393

Amount of Each Disbursement this Period

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

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

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

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

| |
|----------|
| 18500.00 |
|----------|

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

Date of Disbursement

Mailing Address 200 GREENCASTLE ROAD

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 31 | | 2015 |

City State Zip Code
TYRONE GA 30290

Transaction ID : SB29.4465

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

| |
|--------|
| 813.77 |
|--------|

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

Mailing Address

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

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

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

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

| |
|--------|
| 813.77 |
|--------|

| |
|--------|
| 813.77 |
|--------|