



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Jody Hice for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	89660.03	345227.51
(b) Total Contribution Refunds (from Line 20(d)) .....	1000.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	88660.03	344227.51
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	124012.07	297204.86
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	124012.07	297204.86
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	47022.65	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Jody Hice for Congress**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	76209.71	290834.96
(ii) Unitemized.....	7588.80	18625.29
(iii) TOTAL of contributions from individuals ▶	83798.51	309460.25
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	3000.00	24500.00
(d) The Candidate.....	2861.52	11267.26
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	89660.03	345227.51
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
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)..... ▶	89660.03	345227.51

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	124012.07	297204.86
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	1000.00	1000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000.00	1000.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	125012.07	298204.86

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	82374.69
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	89660.03
25. SUBTOTAL (add Line 23 and Line 24).....	172034.72
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	125012.07
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	47022.65

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

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

Mailing Address 2087 Bakers Mill Rd.

City Dacula State GA Zip Code 30019-4621

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

Name of Employer OneAmerica Securities Occupation Representative

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 11 / 2014

**Transaction ID : A60878E4FA8C740F2A8A**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Eva Elder**

Mailing Address 1320 Ernest Elder Rd

City Winder State GA Zip Code 30680-4218

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 11 / 2014

**Transaction ID : A06E3AE52D18349BCAE3**

Amount of Each Receipt this Period  
600.00

**C.** Full Name (Last, First, Middle Initial)  
**Scott Meadow**

Mailing Address 4083 Palace Court

City Lilburn State GA Zip Code 30047-3065

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

Name of Employer Wheeler Brand Occupation Commercial Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 10 / 2014

**Transaction ID : ACF053D7489B148F096C**

Amount of Each Receipt this Period  
500.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

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

Mailing Address 721 Oak Grove Rd.

City Washington State GA Zip Code 30673-3420

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

Name of Employer Delta Air Lines Occupation Pilot

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 28 / 2014**

**Transaction ID : A612A68CE787448208BE**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Ron Rollins**

Mailing Address 1640 Snows Mill Rd

City Monroe State GA Zip Code 30655-5286

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2199.44**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A6CBCABCEFBFA743B09CC**

Amount of Each Receipt this Period  
**699.44**

In-kind:Mileage

**C.** Full Name (Last, First, Middle Initial)  
**Andrew Clyde**

Mailing Address 4800 Atlanta Hwy.

City Bogart State GA Zip Code 30622-2113

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

Name of Employer Clyde Armory, Inc. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 07 / 2014**

**Transaction ID : AADB2954766004CF7A34**

Amount of Each Receipt this Period  
**1150.00**

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

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

**2099.44**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Nellie M. Arnold**

Mailing Address 2719 Bay Ridge Dr

City Loganville State GA Zip Code 30052-3706

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2949.81**

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

**Transaction ID : A6BFB1F2471444A7995C**

Amount of Each Receipt this Period  
**100.00**

Redesignation Pending

**B.** Full Name (Last, First, Middle Initial)  
**Charlotte Mayo**

Mailing Address 1120 Brookstone Estate Dr.

City Loganville State GA Zip Code 30052-9272

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  
**1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 07 / 2014**

**Transaction ID : A721F9CF57B9B433EB58**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Robert Jessup**

Mailing Address 3510 McCuller's Rd.

City Loganville State GA Zip Code 30052-2927

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A245A502815C04E09A71**

Amount of Each Receipt this Period  
**100.00**

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

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

**1200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sonya Abner**

Mailing Address 2200 Longwood Dr.

City	State	Zip Code
Auburn	AL	36830-7106

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

Name of Employer	Occupation
None	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : ACA90C56737D24480A84**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**William Brantley**

Mailing Address PO Box 927

City	State	Zip Code
Statham	GA	30666-0019

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

Name of Employer	Occupation
Information Requested	Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A26A405075856432A991**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 4951 Center Hill Church Rd

City	State	Zip Code
Loganville	GA	30052-7200

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

Name of Employer	Occupation
None	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : A48FB34F511EB4B66A60**

Amount of Each Receipt this Period  
100.00

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

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

1600.00

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

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

FOR LINE NUMBER: PAGE 9 OF 73  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John McCall**

Mailing Address **PO Box 5112**

City **Athens** State **GA** Zip Code **30604-5112**

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

Name of Employer **TRS Labs, Inc.** Occupation **Professor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : AB3A54B590A944A57B99**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Herb Waldman**

Mailing Address **32 Hice Dr.**

City **Ellijay** State **GA** Zip Code **30536-0611**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7800.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : AF8257BEB2ECF4F1EAC9**

Amount of Each Receipt this Period  
**2600.00**

**C.** Full Name (Last, First, Middle Initial)  
**James Rose**

Mailing Address **1020 Scott Ter**

City **Athens** State **GA** Zip Code **30606-6269**

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

Name of Employer **Chore Time** Occupation **Technical Service Rep**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 28 / 2014**

**Transaction ID : A19F45B647AB64C328C9**

Amount of Each Receipt this Period  
**200.00**

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

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

**3800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bradley Bakotic**

Mailing Address 2965 Manor Bridge Dr.

City State Zip Code  
Alpharetta GA 30004-8813

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

Name of Employer Occupation  
Bako Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2014

**Transaction ID : A9CB72E7B91C1451EAC4**

Amount of Each Receipt this Period  
1000.00

Redesignation Pending

**B.** Full Name (Last, First, Middle Initial)  
**Joe Putman**

Mailing Address 1801 Wesleyan Ln.

City State Zip Code  
Loganville GA 30052-4148

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

Name of Employer Occupation  
Molnlycke Health Care Software Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AC3E3804224394630A9C**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Robert Johnson**

Mailing Address 516 Cooper Dr. SE

City State Zip Code  
Rome GA 30161-6012

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : A5BBBA25ACD864914B9D**

Amount of Each Receipt this Period  
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John S. Carr**

Mailing Address 3450 Youth Monroe Rd

City Loganville State GA Zip Code 30052-4327

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

Name of Employer Self Employed Occupation Healthcare

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 28 / 2014

**Transaction ID : A7BC280F3AFC04AC7B25**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Billy Adamson**

Mailing Address 951 Thornwood Circle

City Covington State GA Zip Code 30016-8103

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

Name of Employer GEXPRO Occupation Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A07F78483596A4484909**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Andy Cheatham**

Mailing Address 2300 E Fork Alcovy Rd

City Dacula State GA Zip Code 30019-2443

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

Name of Employer Advantage Fire Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : AC4F8A05FD23A49A5A62**

Amount of Each Receipt this Period  
500.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Amy Chinouth**

Mailing Address 1081 Pine Hill Rd.

City State Zip Code  
Watkinsville GA 30677-1879

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

Name of Employer Occupation  
Keller Williams Realty Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AD603BF20D6B1455B839**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert Marbury**

Mailing Address 2910 Trailing Ivy Way

City State Zip Code  
Buford GA 30519-7637

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

Name of Employer Occupation  
Marbury Creative Group Advertising

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : A6AD7CFEBEB194263A1E**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Herb Waldman**

Mailing Address 32 Hice Dr.

City State Zip Code  
Ellijay GA 30536-0611

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A923880F6A899449CBA3**

Amount of Each Receipt this Period  
600.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Nellie M. Arnold**

Mailing Address 2719 Bay Ridge Dr

City Loganville State GA Zip Code 30052-3706

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2849.81**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 25 / 2014**

**Transaction ID : A389792DE8AB94D098DA**

Amount of Each Receipt this Period  
**100.00**

Redesignation Pending

**B.** Full Name (Last, First, Middle Initial)  
**Jordan Chinouth**

Mailing Address 1081 Pine Hill Rd.

City Watkinsville State GA Zip Code 30677-1879

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

Name of Employer J. Russell and Associates Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A2B51F2CD182F4BAC956**

Amount of Each Receipt this Period  
**2600.00**

**C.** Full Name (Last, First, Middle Initial)  
**John Fry**

Mailing Address 3062 Cardinal Lake Dr.

City Duluth State GA Zip Code 30096-3938

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

Name of Employer National Allergy Supply Occupation COO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 23 / 2014**

**Transaction ID : AB45862E4920041C2871**

Amount of Each Receipt this Period  
**250.00**

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

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

**2950.00**

**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 14 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Bhavin Jani**

Mailing Address 1202 Savannah Lane

City State Zip Code  
Monroe GA 30655-8223

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

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 14 / 2014

**Transaction ID : AC689AF1168BA44B6A3C**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Taylor Harris**

Mailing Address 11 Lumpkin St.  
Ste. 200

City State Zip Code  
Lawrenceville GA 30046-8451

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 21 / 2014

**Transaction ID : A53E2EDF769654CF38F1**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Bobby Williams**

Mailing Address 3434 Howell St. NW

City State Zip Code  
Duluth GA 30096-3315

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

Name of Employer Occupation  
EZ Pay Banking Services

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 06 / 2014

**Transaction ID : AC84A8B10AA3E4ACBA15**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Margaret Smith**

Mailing Address 2392 Seaborn Place

City State Zip Code  
Duluth GA 30097-3779

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**287.66**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : AA5274AC23EB54A89BD1**

Amount of Each Receipt this Period  
**141.43**

In-kind: Meeting Expense

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

Mailing Address 836 Bobbin Mill Rd

City State Zip Code  
Athens GA 30606-4208

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

Name of Employer Occupation  
Lake Oconee Oral Surgery Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 28 / 2014**

**Transaction ID : AB6007357B9E2473F8FE**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Cynthia Deen Howell**

Mailing Address 3643 Ridge Towne Dr

City State Zip Code  
Duluth GA 30096-6631

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

Name of Employer Occupation  
Peachtree Clippers LLC Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

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

**Transaction ID : AED08374E73B64B6C9DC**

Amount of Each Receipt this Period  
**500.00**

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

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

**1141.43**

**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 16 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Chasman**

Mailing Address 1011 Brookview Court

City Athens State GA Zip Code 30606-5752

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

Name of Employer Self Employed Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 28 / 2014

**Transaction ID : A39740560C1A147E081D**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. David Harkins**

Mailing Address 650 Saint Ives Walk

City Monroe State GA Zip Code 30655-1977

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

Name of Employer Athens Orthopedic Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : A4B89B604740C4BEA99F**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Kevin Ringo**

Mailing Address 2575 Gate Park Drive

City Bethlehem State GA Zip Code 30620-7627

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

Name of Employer NJUN LLC Occupation Wastewater Treatment

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : A44F81360F8DE4A49954**

Amount of Each Receipt this Period  
 1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Sauers**

Mailing Address 3778 Malachi Way

City Loganville State GA Zip Code 30052-4502

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

Name of Employer Associated Financial Partners Occupation Financial Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2335.85

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : A2695A517F47243BC8A8**

Amount of Each Receipt this Period  
557.00

In-kind: Billboard

**B.** Full Name (Last, First, Middle Initial)  
**Michael Townsend**

Mailing Address 849 Big Horn Hollow

City Suwanee State GA Zip Code 30024-1764

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  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 07 / 2014

**Transaction ID : A92AC5CD637334164A8F**

Amount of Each Receipt this Period  
1100.00

**C.** Full Name (Last, First, Middle Initial)  
**Bob Johnson**

Mailing Address PO Box 2609

City Blue Ridge State GA Zip Code 30513-0046

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

Name of Employer Excel Graphic Services Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : AC4EB32F8A81046F9A4E**

Amount of Each Receipt this Period  
500.00

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

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

2157.00

**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 18 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ming Lin**

Mailing Address 6900 Boles Rd.

City Duluth	State GA	Zip Code 30097-1816
----------------	-------------	------------------------

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

Name of Employer Pacific Ventures, Inc.	Occupation General Contractor
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 20 / 2014

**Transaction ID : A87FB0A6CC87042BB94F**

Amount of Each Receipt this Period  
1600.00

**B.** Full Name (Last, First, Middle Initial)  
**Andrew Clyde**

Mailing Address 4800 Atlanta Hwy.

City Bogart	State GA	Zip Code 30622-2113
----------------	-------------	------------------------

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

Name of Employer Clyde Armory, Inc.	Occupation CEO
--	-------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1150.00

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

**Transaction ID : A5FAD83F2138E4C0DAFA**

Amount of Each Receipt this Period  
1150.00

**C.** Full Name (Last, First, Middle Initial)  
**Timothy Mills**

Mailing Address 7430 Polo Hill

City Cumming	State GA	Zip Code 30040-7098
-----------------	-------------	------------------------

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

Name of Employer Avisena	Occupation SVP Sales
-----------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2014

**Transaction ID : AC4FBF2D4F25D47FD8C3**

Amount of Each Receipt this Period  
500.00

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

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

3250.00

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

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

FOR LINE NUMBER: PAGE 19 OF 73  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ronald B. Edenfield**

Mailing Address 4191 Cole Rd

City Villa Rica State GA Zip Code 30180-3337

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

Name of Employer Wayfield Foods Occupation President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : A8EC4E2CC4DCA4DBDBEI**

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
**Steve Gebhardt**

Mailing Address 2394 Mount Vernon Road. Suite 150

City Atlanta State GA Zip Code 30338-3068

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : A1133AE06254145B8B3B**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Strong Parrott**

Mailing Address 6153 Stadium Ct

City Norcross State GA Zip Code 30092-2340

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1700.00

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

**Transaction ID : ADD1811FA1DD146F6946**

Amount of Each Receipt this Period  
500.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

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

Mailing Address 4951 Center Hill Church Rd

City Loganville State GA Zip Code 30052-7200

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2014**

**Transaction ID : A4C957F70356A4807A0F**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Evelyn Griffin**

Mailing Address 3207 Groveland Ln

City Houston State TX Zip Code 77019-3219

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A3A3CA8E383804D8F953**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**Timothy Mayo**

Mailing Address 131 Walnut Ln.

City Covington State GA Zip Code 30014-0947

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

Name of Employer Capital Improvement Group, Inc. Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2014**

**Transaction ID : AFE5894B6293C461583F**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1700.00**

**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 21 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ralph Olson**

Mailing Address 1166 Golfview Ter.

City Monroe	State GA	Zip Code 30655-2233
----------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

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

**Transaction ID : ABF8B2D6D1E5640FD925**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 137 Sunningdale Dr

City Winder	State GA	Zip Code 30680-4093
----------------	-------------	------------------------

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

Name of Employer Hill's Ace Hardware	Occupation Retail
---	----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 30 / 2014

**Transaction ID : AEE850AA305024CD794B**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Scott Beaver**

Mailing Address 1790 Lane Creek Dr.

City Bishop	State GA	Zip Code 30621-1191
----------------	-------------	------------------------

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

Name of Employer Allstate	Occupation Insurance Agent
------------------------------	-------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 19 / 2014

**Transaction ID : A483941870BA143AEA69**

Amount of Each Receipt this Period  
600.00

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Lee**

Mailing Address 3338 Peachtree Rd. NE Apt. 2105

City Atlanta	State GA	Zip Code 30326-1469
-----------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
None	Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014

**Transaction ID : A33EF809DF5804F508BD**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Nellie M. Arnold**

Mailing Address 2719 Bay Ridge Dr

City Loganville	State GA	Zip Code 30052-3706
--------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
None	Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1749.81

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 20 / 2014

**Transaction ID : AAFED106438EA4CEF86E**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**William Franklin Azbell**

Mailing Address 315 Comanche Trace

City Auburn	State GA	Zip Code 30011-2733
----------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
Self Employed	Real Estate Agent/Accountant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A57476F4952CA46C5A18**

Amount of Each Receipt this Period  
500.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lowell Justice**

Mailing Address 3173 Second Kolomoki Road

City Blakely State GA Zip Code 39823-4450

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

Name of Employer Miller County Medical Center Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 06 / 2014

**Transaction ID : A8E7933F0308B4F23949**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mike Power**

Mailing Address 1821 Crystal Hills Dr.

City Athens State GA Zip Code 30606-5344

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A654AE5D2A68C4FA58D6**

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
**Gene Williams**

Mailing Address PO Box 425

City Mansfield State GA Zip Code 30055-0425

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

Name of Employer Concerned for the World Occupation Evangelist Ministry

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A269B63BC721349C8A4D**

Amount of Each Receipt this Period  
 250.00

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

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

1050.00

**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 24 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Brenda Duke</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 19 / 2014
Mailing Address 831 Cove Springs Drive		<b>Transaction ID : A0A30A24A29A944FA884</b>
City Augusta	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer None	Occupation Homemaker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) <b>B. Jean Brantley</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2014
Mailing Address 2323 Booth Cir		<b>Transaction ID : A53980740AAD44E9F849</b>
City Winder	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer None	Occupation Homemaker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Charles Sapp</b>		Date of Receipt M M / D D / Y Y Y Y Y 02 / 18 / 2014
Mailing Address 1012 Clover Leaf Dr.		<b>Transaction ID : AB39595587A7145DD96C</b>
City McDonough	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Kherimba Facilities Service	Occupation Facilities Management	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4100.00
<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: (check only one)	PAGE 25 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kenneth Besecker**

Mailing Address 135 Bar H Ct.

City Athens State GA Zip Code 30605-4702

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2014**

**Transaction ID : A4935951083274EFF863**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Evelyn Griffin**

Mailing Address 3207 Groveland Ln

City Houston State TX Zip Code 77019-3219

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A48A30A82EC59474C86E**

Amount of Each Receipt this Period  
**2400.00**

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Singleton**

Mailing Address 3621 Brookview Dr.

City Loganville State GA Zip Code 30052-6135

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2014**

**Transaction ID : A6305698CB91646CA9EE**

Amount of Each Receipt this Period  
**300.00**

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

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

**2950.00**

**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 26 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charlotte Mayo**

Mailing Address 1120 Brookstone Estate Dr.

City Loganville	State GA	Zip Code 30052-9272
--------------------	-------------	------------------------

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  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 07 / 2014

**Transaction ID : A5F310B9D89BE485EB65**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 202 Lathem Laurel Dr.

City Clarksville	State GA	Zip Code 30523-5399
---------------------	-------------	------------------------

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

Name of Employer North Georgia Foods Inc.	Occupation Owner
--	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AAE2C0BB24D214E41BC3**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Glenn Hicks**

Mailing Address 3890 Saint Elizabeth Sq.

City Duluth	State GA	Zip Code 30096-8025
----------------	-------------	------------------------

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

Name of Employer Investor	Occupation Glenwood Holdings, LLC
------------------------------	--------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : A698009A7754F4308A64**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Baxter**

Mailing Address 3875 Lovers Ln.

City Monroe	State GA	Zip Code 30656-8556
----------------	-------------	------------------------

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

Name of Employer Appalachian Mountain Services	Occupation CEO
---	-------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 11 / 2014

**Transaction ID : A9EB6A8A3B8304E5695C**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Elizabeth Sims**

Mailing Address PO Box 683

City Winder	State GA	Zip Code 30680-0683
----------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : AB49F49B641D547FB924**

Amount of Each Receipt this Period  
1600.00

**C.** Full Name (Last, First, Middle Initial)  
**Herb Waldman**

Mailing Address 32 Hice Dr.

City Ellijay	State GA	Zip Code 30536-0611
-----------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff2014

Election Cycle-to-Date  
7800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AB2D04939B78848EEBB4**

Amount of Each Receipt this Period  
1400.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pamela Ewing**

Mailing Address 2939 Overwood Ln

City Snellville	State GA	Zip Code 30078-3510
--------------------	-------------	------------------------

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

Name of Employer Craft Electric, Inc.	Occupation Office Manager
--	------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 27 / 2014

**Transaction ID : A603BCA96D6DB4FC9822**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**James Timberlake**

Mailing Address 1100 Shoals Dr.

City Athens	State GA	Zip Code 30606-5390
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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  
2000.00

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

**Transaction ID : AB584D4E8859043E88FD**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Herb Waldman**

Mailing Address 32 Hice Dr.

City Ellijay	State GA	Zip Code 30536-0611
-----------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff2014

Election Cycle-to-Date  
7800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AFE7343F66B894A04A0A**

Amount of Each Receipt this Period  
1200.00

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

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

2300.00

**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 29 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeff Annis**

Mailing Address 549 Cedar Rock Dr.

City Augusta State GA Zip Code 30907-4984

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

Name of Employer: Advanced Services Occupation: Pest Control

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 31 / 2014

**Transaction ID : A50872EC43FEF4766BBD**

Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Glenn Matlock**

Mailing Address 875 River Cove Dr.

City Dacula State GA Zip Code 30019-2094

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

Name of Employer: Neighborhood News Occupation: Journalist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 21 / 2014

**Transaction ID : AB43CFD721C3E4D3AA19**

Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Drew Link**

Mailing Address 7331 Lake Walton Blvd.

City Covington State GA Zip Code 30014-8557

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

Name of Employer: Clairon Metals Corp Occupation: CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1200.00

Date of Receipt: 03 / 06 / 2014

**Transaction ID : AF5B3E3FBDFFEE4ADAAF7**

Amount of Each Receipt this Period: 200.00

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

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

950.00

**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 30 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kenneth Graves**

Mailing Address 4185 Silver Peak Pkwy  
# B

City Suwanee State GA Zip Code 30024-4021

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

Name of Employer Capital Research Advisors Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 06 / 2014

**Transaction ID : A075F4C79035A424FB0A**

Amount of Each Receipt this Period  
1600.00

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Russell**

Mailing Address 526 Bellbrook Lane

City Lawrenceville State GA Zip Code 30045-8390

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

Name of Employer GA Solar Lighting Inc. Occupation Skylight Sales and Installation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : A3D2D64C06ABF41D1B4C**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ormonde Mahoney**

Mailing Address 1765 Old West Broad St.

City Athens State GA Zip Code 30606-2853

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

Name of Employer AOC Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 13 / 2014

**Transaction ID : ABB288206F02A4C4090B**

Amount of Each Receipt this Period  
500.00

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

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

2600.00

**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 31 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Drillot**

Mailing Address **PO Box 97**

City **Suwanee** State **GA** Zip Code **30024-0097**

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

Name of Employer **Hadco** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : AAF3A4B9313B74E7BB11**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Christopher Bachelder**

Mailing Address **1194 Brookgate Way NE**

City **Atlanta** State **GA** Zip Code **30319-2877**

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

Name of Employer **Hillsdale College** Occupation **Vice President, Marketing**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

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

**Transaction ID : A8CB0DD91E1D94800998**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Neil Daniell**

Mailing Address **805 Streamside Dr.**

City **McDonough** State **GA** Zip Code **30252-9035**

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

Name of Employer **Dynamac** Occupation **Geologist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

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

**Transaction ID : ABB4B9F97AD1042C1ADF**

Amount of Each Receipt this Period  
**500.00**

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

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

**2000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Joseph L. Jackson**

Mailing Address 6 Huntington Pl.

City	State	Zip Code
Waynesboro	GA	30830-5414

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

Name of Employer	Occupation
Medical Specialists	Physican

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 20 / 2014

**Transaction ID : A7E1D599773E74A10857**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**James Burton**

Mailing Address 2012 Armstrong Mill Rd.

City	State	Zip Code
Franklin	GA	30217-3751

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

Name of Employer	Occupation
Information Requested	Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
202.00

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

**Transaction ID : A21B1637545C146BD834**

Amount of Each Receipt this Period  
101.00

**C.** Full Name (Last, First, Middle Initial)  
**Nick Derajtys**

Mailing Address 400 Timothy Rd. Unit 1101

City	State	Zip Code
Athens	GA	30606-7924

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

Name of Employer	Occupation
Information Requested	Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2203.50

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A943C85C916D745E2BDC**

Amount of Each Receipt this Period  
2203.50  
In-kind:Mileage

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

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

2554.50

**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 33 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Harrison**

Mailing Address 196 Holman Ave.

City Athens State GA Zip Code 30606-2874

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

Name of Employer Self Employed Occupation Musician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : AB27D28D07AD2419689C**

Amount of Each Receipt this Period  
 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Benjamin Stout**

Mailing Address 3010 Waterford Dr.

City Gainesville State GA Zip Code 30504-3900

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

Name of Employer Port Royal Outfitters Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2014

**Transaction ID : A85A99E0199FF408CB11**

Amount of Each Receipt this Period  
 672.00

In-kind:Mileage

**C.** Full Name (Last, First, Middle Initial)  
**Robert Jessup**

Mailing Address 3510 McCuller's Rd.

City Loganville State GA Zip Code 30052-2927

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : A9A5517000B3341B6AAE**

Amount of Each Receipt this Period  
 100.00

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

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

3372.00

**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 34 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Loretta Brown**

Mailing Address 472 Poplar St.

City State Zip Code  
Monroe GA 30655-7300

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 07 / 2014

**Transaction ID : A27E1A87AA6274435B97**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Nellie M. Arnold**

Mailing Address 2719 Bay Ridge Dr

City State Zip Code  
Loganville GA 30052-3706

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

Name of Employer Occupation Information Requested  
None Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2749.81

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 31 / 2014

**Transaction ID : AE620E8004E4F41C0B66**

Amount of Each Receipt this Period  
850.19

**C.** Full Name (Last, First, Middle Initial)  
**Kay Neely**

Mailing Address 149 O'Connor Drive

City State Zip Code  
Milledgeville GA 31061-8258

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

Name of Employer Occupation Information Requested  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.34

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 17 / 2014

**Transaction ID : A8827EF5294974B1C9AE**

Amount of Each Receipt this Period  
200.34  
In-kind: Event Catering

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

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

1300.53

**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 35 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Erica Daniell**

Mailing Address 805 Streamside Dr.

City McDonough	State GA	Zip Code 30252-9035
-------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Kirby Gs
-----------------------------------	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : A2A5AD43F9B5A422DB70**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Timothy Mills**

Mailing Address 7430 Polo Hill

City Cumming	State GA	Zip Code 30040-7098
-----------------	-------------	------------------------

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

Name of Employer Avisena	Occupation SVP Sales
-----------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 15 / 2014

**Transaction ID : AEF43E340BE444EB7ADC**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Douglas Cochran**

Mailing Address PO Box 1170

City Monroe	State GA	Zip Code 30655-1170
----------------	-------------	------------------------

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

Name of Employer Cochran Wholesale Pharmaceutical, Inc.	Occupation Pharmacist
--	--------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 21 / 2014

**Transaction ID : ABE92414985EE4236981**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Sauers**

Mailing Address 3778 Malachi Way

City Loganville State GA Zip Code 30052-4502

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

Name of Employer Associated Financial Partners Occupation Financial Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1778.85**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 21 / 2014**

**Transaction ID : A9B87D69FA1BC421D924**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Fitz**

Mailing Address 1091 Two Oaks Dr.

City Athens State GA Zip Code 30606-5734

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 / D D / Y Y Y Y  
**02 / 28 / 2014**

**Transaction ID : AB4D89C84194340B88B1**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Samuel Massey**

Mailing Address 240 Riverview Rd.

City Athens State GA Zip Code 30606-4630

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 **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : A38BF4DEEEB1945DCAAF**

Amount of Each Receipt this Period  
**500.00**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Brad McCance**

Mailing Address 2130 Highway 81 South

City Loganville State GA Zip Code 30052-4331

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 28 / 2014

**Transaction ID : A7492B7B48E3140E480F**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Sandra Strickland**

Mailing Address 1471 Eugenia Terrace

City Lawrenceville State GA Zip Code 30046-7493

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : A8C5C8B9B20DD4DC0AC5**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Brack Maggard**

Mailing Address 217 Whitney St

City Eatonton State GA Zip Code 31024-5735

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

Name of Employer Information Requested Occupation Information Requested  
 SPS Co President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : AC73C39AEFBE44F1C80A**

Amount of Each Receipt this Period  
 800.00

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

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

3050.00

**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 38 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alan Akins**

Mailing Address 305 Shawnee N. Dr. Ste. 800

City Suwanee State GA Zip Code 30024-2295

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

Name of Employer Alphagraphics #717 Occupation Printer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : A8DFF1A7E5D6648469EF**

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Evelyn Griffin**

Mailing Address 3207 Groveland Ln

City Houston State TX Zip Code 77019-3219

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A146B328306434232BE4**

Amount of Each Receipt this Period  
 2600.00

Redesignation Pending

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Nellie M. Arnold**

Mailing Address 2719 Bay Ridge Dr

City Loganville State GA Zip Code 30052-3706

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff2014

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2014

**Transaction ID : A5228AC627BE84125A9D**

Amount of Each Receipt this Period  
 149.81

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

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

3049.81

**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 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Frank Shackelford**

Mailing Address 1938 Sautee Trl.

City State Zip Code  
Sautee Nacoochee GA 30571-5082

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Occupation Information Requested  
Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014

**Transaction ID : AD8D8AF44C61941B2A64**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Darrell Whiddon**

Mailing Address 1235 River Cove Rd.

City State Zip Code  
Social Circle GA 30025-4810

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

Name of Employer Occupation Information Requested  
The People Bank Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Occupation Information Requested  
Election Cycle-to-Date  
310.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : AE69E286AF8204DFCB7F**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Ray Jones**

Mailing Address 601 Filedgreen Dr.

City State Zip Code  
Jonesboro GA 30238-4859

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

Name of Employer Occupation Information Requested  
Ameris Bank Mortgage Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Occupation Information Requested  
Election Cycle-to-Date  
250.00

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

**Transaction ID : A7365505A465342CE92C**

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: (check only one)	PAGE 40 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dudney Harris**

Mailing Address 1801 Sugar Creek Trl.

City State Zip Code  
Buckhead GA 30625-2517

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014

**Transaction ID : A7B26DBA46F7A45BC9AB**

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
**Barry Jones**

Mailing Address 1030 Oaklake Terrace

City State Zip Code  
Watkinsville GA 30677-5972

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

Name of Employer Occupation  
United Therapeutics Corporation Pharmaceutical Sales Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2014

**Transaction ID : A0CB57BACDF124938969**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1035.00

76209.71

**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 41 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TEAPARTY.NET LEADERSHIP FUND**

Mailing Address **717 KING STREET  
SUITE 300**

City **Alexandria** State **VA** Zip Code **22314-3014**

FEC ID number of contributing federal political committee. **C C00520825**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**02 / 28 / 2014**

**Transaction ID : AD58B4E5A6A2541B7838**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Committee to Elect Josh McKoon**

Mailing Address **PO Box 2565**

City **Columbus** State **GA** Zip Code **31902-2565**

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 /  D  D /  Y  Y  Y  Y  
**03 / 31 / 2014**

**Transaction ID : AF08D75231BC047979EF**

Amount of Each Receipt this Period  
**500.00**

Permissible Funds

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**3000.00**

**3000.00**

**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 42 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jody Hice**

Mailing Address PO Box 586

City: Monroe State: GA Zip Code: 30655-0586

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

Name of Employer: Summit Baptist Church Occupation: Pastor

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: 9322.38

Date of Receipt: 02 / 12 / 2014

**Transaction ID : A049402E02DF94FE283C**

Amount of Each Receipt this Period: 10.00

**B.** Full Name (Last, First, Middle Initial)  
**Jody Hice**

Mailing Address PO Box 586

City: Monroe State: GA Zip Code: 30655-0586

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

Name of Employer: Summit Baptist Church Occupation: Pastor

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: 11267.26

Date of Receipt: 03 / 31 / 2014

**Transaction ID : AAA3509A03961493B893**

Amount of Each Receipt this Period: 1056.16

In-kind:Mileage

**C.** Full Name (Last, First, Middle Initial)  
**Jody Hice**

Mailing Address PO Box 586

City: Monroe State: GA Zip Code: 30655-0586

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

Name of Employer: Summit Baptist Church Occupation: Pastor

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: 10211.10

Date of Receipt: 02 / 26 / 2014

**Transaction ID : AAE2B8B7BAD1B49FDB26**

Amount of Each Receipt this Period: 888.72

In-kind:Mileage

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

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

1954.88

**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 43 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jody Hice**

Mailing Address PO Box 586

City State Zip Code  
Monroe GA 30655-0586

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

Name of Employer Occupation  
Summit Baptist Church Pastor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**9312.38**

Date of Receipt  
 /  /   
**01 / 31 / 2014**

**Transaction ID : A0F3FBA65C12841FC9C9**

Amount of Each Receipt this Period  
**906.64**

In-kind: Mileage

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

Amount of Each Receipt this Period

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

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

**906.64**

**2861.52**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ron Rollins</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1640 Snows Mill Rd		Amount of Each Disbursement this Period 699.44 <b>Transaction ID : B6CBCABCEFBA743B09CD</b>
City Monroe	State GA	
Zip Code 30655-5286	Purpose of Disbursement In-kind:Mileage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Margaret Smith</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 2392 Seaborn Place		Amount of Each Disbursement this Period 141.43 <b>Transaction ID : BA5274AC23EB54A89BD1</b>
City Duluth	State GA	
Zip Code 30097-3779	Purpose of Disbursement In-kind:Meeting Expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. John Sauers</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 3778 Malachi Way		Amount of Each Disbursement this Period 557.00 <b>Transaction ID : B2695A517F47243BC8A8</b>
City Loganville	State GA	
Zip Code 30052-4502	Purpose of Disbursement In-kind:Billboard	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1397.87
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nick Derajtys</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 400 Timothy Rd. Unit 1101		Amount of Each Disbursement this Period 2203.50 <b>Transaction ID : B943C85C916D745E2BDC</b>
City Athens State GA Zip Code 30606-7924	Purpose of Disbursement In-kind:Mileage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Benjamin Stout</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2014
Mailing Address 3010 Waterford Dr.		Amount of Each Disbursement this Period 672.00 <b>Transaction ID : B85A99E0199FF408CB11</b>
City Gainesville State GA Zip Code 30504-3900	Purpose of Disbursement In-kind:Mileage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Kay Neely</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2014
Mailing Address 149 O'Connor Drive		Amount of Each Disbursement this Period 200.34 <b>Transaction ID : B8827EF5294974B1C9AE</b>
City Milledgeville State GA Zip Code 31061-8258	Purpose of Disbursement In-kind:Event Catering Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3075.84
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jody Hice</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2014</b>
Mailing Address <b>PO Box 586</b>		Amount of Each Disbursement this Period <b>1056.16</b> <b>Transaction ID : BAA3509A03961493B893</b>
City <b>Monroe</b> State <b>GA</b> Zip Code <b>30655-0586</b>	Purpose of Disbursement In-kind: Mileage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jody Hice</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 26 / 2014</b>
Mailing Address <b>PO Box 586</b>		Amount of Each Disbursement this Period <b>888.72</b> <b>Transaction ID : BAE2B8B7BAD1B49FDB26</b>
City <b>Monroe</b> State <b>GA</b> Zip Code <b>30655-0586</b>	Purpose of Disbursement In-kind: Mileage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jody Hice</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 31 / 2014</b>
Mailing Address <b>PO Box 586</b>		Amount of Each Disbursement this Period <b>906.64</b> <b>Transaction ID : B0F3FBA65C12841FC9C9</b>
City <b>Monroe</b> State <b>GA</b> Zip Code <b>30655-0586</b>	Purpose of Disbursement In-kind: Mileage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2851.52</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 73			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. J. Russell &amp; Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address PO Box 49471		Amount of Each Disbursement this Period 12000.00 <b>Transaction ID : B087E0B175D4E44CFAEE</b>
City Athens	State GA	
Zip Code 30604-9471	Purpose of Disbursement Field Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. MRG Photography</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 1686 Mt. Hebron Road		Amount of Each Disbursement this Period 670.00 <b>Transaction ID : B114246DB57B9409DA4F</b>
City Hartwell	State GA	
Zip Code 30643-3402	Purpose of Disbursement Photography	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. The Barr Group</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 503-C Ligon Drive		Amount of Each Disbursement this Period 699.86 <b>Transaction ID : B5A183B47A46742EEA2A</b>
City Nashville	State TN	
Zip Code 37204-2858	Purpose of Disbursement Printing	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13369.86
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Revely LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 621 North Ave. NE Suite C130		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : B0292506F9DAB47E99B5</b>
City Atlanta	State GA Zip Code 30308-2862	
Purpose of Disbursement Media Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Revely LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 621 North Ave. NE Suite C130		Amount of Each Disbursement this Period 2650.00 <b>Transaction ID : B0A8CCCCB53294BA795F</b>
City Atlanta	State GA Zip Code 30308-2862	
Purpose of Disbursement Website Design	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Professional Data Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 2470 Daniels Bridge Rd Ste 121		Amount of Each Disbursement this Period 1534.96 <b>Transaction ID : B2DA48264BBA5423CA71</b>
City Athens	State GA Zip Code 30606-6191	
Purpose of Disbursement Compliance Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5484.96
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 73		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nick Derajtys</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 400 Timothy Rd. Unit 1101		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : B37BCF7E84BEA49889DE</b>
City Athens	State GA Zip Code 30606-7924	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mallory Whitfield</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 714 Bryant Road		Amount of Each Disbursement this Period 210.56 <b>Transaction ID : B365604E8C807445BBF7</b>
City Maxey	State GA Zip Code 30671	
Purpose of Disbursement Mileage Reimbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Commerce Street Events</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 611 Commerce St Ste 2800		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : B4763F934522E4381999</b>
City Nashville	State TN Zip Code 37203-3753	
Purpose of Disbursement Fundraising Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4710.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Community Endorsement Team</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 06 / 2014</b>
Mailing Address 164 Robin Hood Drive		Amount of Each Disbursement this Period <b>3500.00</b> Transaction ID : <b>BBDF0D3D787FD419FA1E</b>
City Douglasville	State GA	
Zip Code 30134-5843	Purpose of Disbursement Field Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Patriot Signage Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 08 / 2014</b>
Mailing Address 1001 Second Avenue		Amount of Each Disbursement this Period <b>6479.00</b> Transaction ID : <b>B3349B754C1AE4C16AEB</b>
City Dayton	State KY	
Zip Code 41074-1291	Purpose of Disbursement Campaign Signs	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Mallory Whitfield</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 10 / 2014</b>
Mailing Address 714 Bryant Road		Amount of Each Disbursement this Period <b>141.12</b> Transaction ID : <b>B71CF6FAAAC1F418399F</b>
City Maxey	State GA	
Zip Code 30671	Purpose of Disbursement Mileage Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>10120.12</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Noah Weinrich</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2014
Mailing Address 1150 Stonebridge Circle		Amount of Each Disbursement this Period 372.73 <b>Transaction ID : B10D5D89369C94B80848</b>
City Watkinsville	State GA	
Zip Code 30677-2078	Purpose of Disbursement Mileage Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Nick Derajtys</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2014
Mailing Address 400 Timothy Rd. Unit 1101		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : BD5A75A5B085C48EF930</b>
City Athens	State GA	
Zip Code 30606-7924	Purpose of Disbursement Field Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Nick Derajtys</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2014
Mailing Address 400 Timothy Rd. Unit 1101		Amount of Each Disbursement this Period 1266.47 <b>Transaction ID : BECD45C2E244141E5AF1</b>
City Athens	State GA	
Zip Code 30606-7924	Purpose of Disbursement Mileage Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3139.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Benjamin Stout</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 3010 Waterford Dr.		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : B65CA7F070AFC42FA8E1</b>
City Gainesville	State GA	
Purpose of Disbursement Field Consulting	Category/ Type	
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)	

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014
Mailing Address Third Street, Suite 2B		Amount of Each Disbursement this Period 59.10 <b>Transaction ID : B47A49F685B1444C799F</b>
City Baton Rouge	State LA	
Purpose of Disbursement CC Transaction Fees	Category/ Type	
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)	

Full Name (Last, First, Middle Initial) <b>c. Benjamin Stout</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 3010 Waterford Dr.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : B4524CB24D4BE4680A20</b>
City Gainesville	State GA	
Purpose of Disbursement Field Consulting	Category/ Type	
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)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2559.10
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 73		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address Third Street, Suite 2B		Amount of Each Disbursement this Period 47.40 <b>Transaction ID : BEE3CC7414A2748F08F0</b>
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. City of Monroe</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address PO Box 725 215 North Broad St.		Amount of Each Disbursement this Period 660.27 <b>Transaction ID : BC0B73107AA8D43FDB36</b>
City Monroe	State GA	
Zip Code 30655-0725	Purpose of Disbursement Utilities	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Professional Data Services</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 2470 Daniels Bridge Rd Ste 121		Amount of Each Disbursement this Period 1511.04 <b>Transaction ID : B8AD7106873124FD1998</b>
City Athens	State GA	
Zip Code 30606-6191	Purpose of Disbursement Compliance Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2218.71
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 73			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Prolifik SEO</b>			Date of Disbursement MM / DD / YYYY 02 / 03 / 2014		
Mailing Address 335 Barnett Shoals			Amount of Each Disbursement this Period 1500.00		
City Athens	State GA	Zip Code 30605-1807	Transaction ID : <b>BB400D32CADEA47BBB37</b>		
Purpose of Disbursement Videography		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. The Barr Group</b>			Date of Disbursement MM / DD / YYYY 02 / 03 / 2014		
Mailing Address 503-C Ligon Drive			Amount of Each Disbursement this Period 2608.94		
City Nashville	State TN	Zip Code 37204-2858	Transaction ID : <b>BC30F793E26D24FB780D</b>		
Purpose of Disbursement Printing		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Benjamin Stout</b>			Date of Disbursement MM / DD / YYYY 02 / 03 / 2014		
Mailing Address 3010 Waterford Dr.			Amount of Each Disbursement this Period 1250.00		
City Gainesville	State GA	Zip Code 30504-3900	Transaction ID : <b>B17E680F4C7CB472C848</b>		
Purpose of Disbursement Field Consulting		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5358.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Matthew Stout</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 2425 W Broad St Ste 3		Amount of Each Disbursement this Period 4000.00 <b>Transaction ID : B84FD88EF9C0D4E7EB82</b>
City Athens State GA Zip Code 30606-3415	Purpose of Disbursement Field Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nick Derajtys</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 400 Timothy Rd. Unit 1101		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : BA4B6AFBF97674C49888</b>
City Athens State GA Zip Code 30606-7924	Purpose of Disbursement Field Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Southern Printing and Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 5399 Wilbanks Dr		Amount of Each Disbursement this Period 195.00 <b>Transaction ID : B5687DE516F2C4C5F855</b>
City Hixson State TN Zip Code 37343-4047	Purpose of Disbursement Printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5695.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Revely LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2014
Mailing Address 621 North Ave. NE Suite C130		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : B11190B6D7B524810963</b>
City Atlanta State GA Zip Code 30308-2862	Purpose of Disbursement Media Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Revely LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2014
Mailing Address 621 North Ave. NE Suite C130		Amount of Each Disbursement this Period 8577.00 <b>Transaction ID : B32DD8DFFDCC64AF5B49</b>
City Atlanta State GA Zip Code 30308-2862	Purpose of Disbursement Voter Data	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Anedot</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2014
Mailing Address Third Street, Suite 2B		Amount of Each Disbursement this Period 5.47 <b>Transaction ID : B33D43EE109C54DC99F5</b>
City Baton Rouge State LA Zip Code 70801	Purpose of Disbursement CC Transaction Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9582.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 73		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Commerce Street Events</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 611 Commerce St Ste 2800		Amount of Each Disbursement this Period 1555.11 <b>Transaction ID : BB9B541C6D39E4205BA4</b>
City Nashville	State TN Zip Code 37203-3753	
Purpose of Disbursement Fundraising Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2014
Mailing Address Third Street, Suite 2B		Amount of Each Disbursement this Period 26.65 <b>Transaction ID : BAA8B459D90F74646AE5</b>
City Baton Rouge	State LA Zip Code 70801	
Purpose of Disbursement CC Transaction Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2014
Mailing Address Third Street, Suite 2B		Amount of Each Disbursement this Period 62.34 <b>Transaction ID : B0F31B52740314938A7E</b>
City Baton Rouge	State LA Zip Code 70801	
Purpose of Disbursement CC Transaction Fees	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1644.10
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 73		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nick Derajtys</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2014
Mailing Address 400 Timothy Rd. Unit 1101		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : B125AF84BF6E744C6AD6</b>
City Athens	State GA	
Zip Code 30606-7924	Purpose of Disbursement Field Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Benjamin Stout</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2014
Mailing Address 3010 Waterford Dr.		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : BD95F9B90BD0143E5BCF</b>
City Gainesville	State GA	
Zip Code 30504-3900	Purpose of Disbursement Field Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Anedot</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2014
Mailing Address Third Street, Suite 2B		Amount of Each Disbursement this Period 8.40 <b>Transaction ID : B4E7F72D777484B68BEE</b>
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement CC Transaction Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2758.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 73			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Benjamin Stout</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 3010 Waterford Dr.		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : B6D3E98ED01A74FECAA8</b>
City Gainesville	State GA	
Zip Code 30504-3900	Purpose of Disbursement Field Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Nick Derajtys</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 400 Timothy Rd. Unit 1101		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : B8E6D26AB3A5644A58D3</b>
City Athens	State GA	
Zip Code 30606-7924	Purpose of Disbursement Field Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address Third Street, Suite 2B		Amount of Each Disbursement this Period 115.14 <b>Transaction ID : B848BDBD7CD7D4524951</b>
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement CC Transaction Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2865.14
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Georgia Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 03 / 2014</b>
Mailing Address 3110 Maple Drive Ste. 150		Amount of Each Disbursement this Period <b>5220.00</b> Transaction ID : <b>B149B2DC8D3C4435684F</b>
City Atlanta State GA Zip Code 30305-2650	Purpose of Disbursement Qualifying Fee	
Candidate Name <b>Georgia Republican Party</b> Category/Type		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Professional Data Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 06 / 2014</b>
Mailing Address 2470 Daniels Bridge Rd Ste 121		Amount of Each Disbursement this Period <b>1528.44</b> Transaction ID : <b>BFAA2D62AB7524E3DA21</b>
City Athens State GA Zip Code 30606-6191	Purpose of Disbursement Compliance Consulting	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. City of Monroe</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 07 / 2014</b>
Mailing Address PO Box 725 215 North Broad St.		Amount of Each Disbursement this Period <b>1269.12</b> Transaction ID : <b>B9E887E67DB5F4D1897B</b>
City Monroe State GA Zip Code 30655-0725	Purpose of Disbursement Utilities	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>8017.56</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 73			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 10 / 2014</b>
Mailing Address <b>Third Street, Suite 2B</b>		Amount of Each Disbursement this Period <b>193.91</b> Transaction ID : <b>BBBC0A0EF9AC04B87879</b>
City <b>Baton Rouge</b> State <b>LA</b> Zip Code <b>70801</b>	Purpose of Disbursement <b>CC Transaction Fees</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Southern Printing and Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 11 / 2014</b>
Mailing Address <b>5399 Wilbanks Dr</b>		Amount of Each Disbursement this Period <b>7800.00</b> Transaction ID : <b>BE83FBAAF57AE4130BA1</b>
City <b>Hixson</b> State <b>TN</b> Zip Code <b>37343-4047</b>	Purpose of Disbursement <b>Printing</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Revily LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 11 / 2014</b>
Mailing Address <b>621 North Ave. NE Suite C130</b>		Amount of Each Disbursement this Period <b>3004.00</b> Transaction ID : <b>B46AB2450797E42078F2</b>
City <b>Atlanta</b> State <b>GA</b> Zip Code <b>30308-2862</b>	Purpose of Disbursement <b>Media Consulting</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>10997.91</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Benjamin Stout</b>		Date of Disbursement MM / DD / YYYY 03 / 11 / 2014
Mailing Address 3010 Waterford Dr.		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : BE2CDFFEF32614C2CA89</b>
City Gainesville	State GA	
Zip Code 30504-3900	Purpose of Disbursement Field Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Nick Derajtys</b>		Date of Disbursement MM / DD / YYYY 03 / 11 / 2014
Mailing Address 400 Timothy Rd. Unit 1101		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : B88458A5437C14EE5A47</b>
City Athens	State GA	
Zip Code 30606-7924	Purpose of Disbursement Field Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Anedot</b>		Date of Disbursement MM / DD / YYYY 03 / 13 / 2014
Mailing Address Third Street, Suite 2B		Amount of Each Disbursement this Period 123.87 <b>Transaction ID : B164A5B0BB9C64C02AAE</b>
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement CC Transaction Fees	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2873.87
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 14 / 2014</b>
Mailing Address <b>Third Street, Suite 2B</b>		Amount of Each Disbursement this Period <b>39.89</b> <b>Transaction ID : B35E9D51E30934641B33</b>
City <b>Baton Rouge</b> State <b>LA</b> Zip Code <b>70801</b>	Purpose of Disbursement <b>CC Transaction Fees</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Commerce Street Events</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 20 / 2014</b>
Mailing Address <b>611 Commerce St Ste 2800</b>		Amount of Each Disbursement this Period <b>1500.00</b> <b>Transaction ID : B6BBDC4A3AE1A450C80E</b>
City <b>Nashville</b> State <b>TN</b> Zip Code <b>37203-3753</b>	Purpose of Disbursement <b>Fundraising Consulting</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Atlanta Business Circulators</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 21 / 2014</b>
Mailing Address <b>850 Pickens Industrial Dr Suite 7</b>		Amount of Each Disbursement this Period <b>16568.91</b> <b>Transaction ID : B0FC3419D36DD40A192F</b>
City <b>Marietta</b> State <b>GA</b> Zip Code <b>30062-3161</b>	Purpose of Disbursement <b>Postage and Printing</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>18108.80</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address Third Street, Suite 2B		Amount of Each Disbursement this Period 246.84 <b>Transaction ID : B5F9EA96B3AE14E89964</b>
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2014
Mailing Address Third Street, Suite 2B		Amount of Each Disbursement this Period 66.93 <b>Transaction ID : B72354303F64147F381D</b>
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. American Legion Post 233</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 4635 Atlanta Hwy		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : B27CD02F57CBE45A4866</b>
City Loganville	State GA	
Zip Code 30052-2639	Purpose of Disbursement Event Facility Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	613.77
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address Third Street, Suite 2B		Amount of Each Disbursement this Period 392.07 <b>Transaction ID : BA83C90994EBB483CB0A</b>
City Baton Rouge	State LA Zip Code 70801	
Purpose of Disbursement CC Transaction Fees	Category/Type	
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)	

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2014
Mailing Address Third Street, Suite 2B		Amount of Each Disbursement this Period 220.12 <b>Transaction ID : B5874CD4986294801B73</b>
City Baton Rouge	State LA Zip Code 70801	
Purpose of Disbursement CC Transaction Fees	Category/Type	
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)	

Full Name (Last, First, Middle Initial) <b>C. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address Third Street, Suite 2B		Amount of Each Disbursement this Period 39.82 <b>Transaction ID : B53D9F382852C4F33992</b>
City Baton Rouge	State LA Zip Code 70801	
Purpose of Disbursement CC Transaction Fees	Category/Type	
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)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	392.01
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. J. Russell &amp; Associates</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 27 / 2014</b>
Mailing Address <b>PO Box 49471</b>		Amount of Each Disbursement this Period <b>5200.00</b> Transaction ID : <b>B67CFD35CC84948B9B0C</b>
City <b>Athens</b> State <b>GA</b> Zip Code <b>30604-9471</b>	Purpose of Disbursement <b>See Below</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Omni Hotels</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 27 / 2014</b>
Mailing Address <b>4001 Maple Ave</b>		Amount of Each Disbursement this Period <b>617.16</b> Transaction ID : <b>B235CA387C0F04A82BE7</b> <b>[MEMO ITEM]</b>
City <b>Dallas</b> State <b>TX</b> Zip Code <b>75219-3240</b>	Purpose of Disbursement <b>Lodging</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 27 / 2014</b>
Mailing Address <b>1911 Epps Bridge Parkway</b>		Amount of Each Disbursement this Period <b>105.90</b> Transaction ID : <b>B0FB34DCA525041008D6</b> <b>[MEMO ITEM]</b>
City <b>Athens</b> State <b>GA</b> Zip Code <b>30606-6130</b>	Purpose of Disbursement <b>Event Supplies</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Airtran</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 9955 Airtran Blvd		Amount of Each Disbursement this Period 643.80
City Orlando	State FL	
Zip Code 32827-5330	Purpose of Disbursement Airfare	Transaction ID : <b>BD4683BBC11F34082A68</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Stephens Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 2515 Atlanta Hwy		Amount of Each Disbursement this Period 350.00
City Athens	State GA	
Zip Code 30606-6919	Purpose of Disbursement Storage	Transaction ID : <b>B5A0353AA8E1142D282F</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Thirty Odd Six Marketing</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 900 Saturn Dr Apt 707		Amount of Each Disbursement this Period 2000.00
City Colorado Springs	State CO	
Zip Code 80905-7822	Purpose of Disbursement Marketing	Transaction ID : <b>B13A170CB04444B11A04</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2014
Mailing Address 3045 Atlanta Hwy		Amount of Each Disbursement this Period 79.18
City Athens	State GA	
Zip Code 30606-3334	Purpose of Disbursement Office Supplies	Transaction ID : B8ADEF424A55B4BE7BEC
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Georgetown Suites</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2014
Mailing Address 1111 30th St NW		Amount of Each Disbursement this Period 488.65
City Washington	State DC	
Zip Code 20007-3707	Purpose of Disbursement Lodging	Transaction ID : BC394EF6BE8644F63B13
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Gwinnett County Republican Party</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2014
Mailing Address 455 Rosedown Way		Amount of Each Disbursement this Period 205.00
City Lawrenceville	State GA	
Zip Code 30043-3025	Purpose of Disbursement Event Tickets	Transaction ID : BBF4E9CD7D48D404284B
Candidate Name Gwinnett County Republican Party	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mallory Whitfield</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014		
Mailing Address 714 Bryant Road			Amount of Each Disbursement this Period 307.15		
City Maxey	State GA	Zip Code 30671	Transaction ID : B0044E4C19EF54AF6A9E		
Purpose of Disbursement See Below		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014		
Mailing Address 1911 Epps Bridge Parkway			Amount of Each Disbursement this Period 278.27		
City Athens	State GA	Zip Code 30606-6130	Transaction ID : B5B603FB25DF04DA5B1B		
Purpose of Disbursement Event Supplies		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]		

Full Name (Last, First, Middle Initial) <b>c. Mallory Whitfield</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014		
Mailing Address 714 Bryant Road			Amount of Each Disbursement this Period 330.39		
City Maxey	State GA	Zip Code 30671	Transaction ID : B34BFD20EC501480BAC7		
Purpose of Disbursement See Below		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	637.54
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 73			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mallory Whitfield</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014		
Mailing Address 714 Bryant Road			Amount of Each Disbursement this Period 204.96		
City Maxey	State GA	Zip Code 30671	Transaction ID : <b>B0D8E86EFD549403C8A4</b>  <b>[MEMO ITEM]</b>		
Purpose of Disbursement Mileage Reimbursement		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014		
Mailing Address 1911 Epps Bridge Parkway			Amount of Each Disbursement this Period 55.61		
City Athens	State GA	Zip Code 30606-6130	Transaction ID : <b>BA8AFA72333754AA1BF7</b>  <b>[MEMO ITEM]</b>		
Purpose of Disbursement Event Supplies		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. Benjamin Stout</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014		
Mailing Address 3010 Waterford Dr.			Amount of Each Disbursement this Period 87.79		
City Gainesville	State GA	Zip Code 30504-3900	Transaction ID : <b>B872A31377F654B97AA1</b>		
Purpose of Disbursement See Below		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: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	87.79
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 73			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Home Depot</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 11 / 2014</b>
Mailing Address 2150 West Spring St.		Amount of Each Disbursement this Period <b>12.75</b>
City <b>Monroe</b>	State <b>GA</b>	
Zip Code <b>30655-3195</b>	Purpose of Disbursement <b>Event Supplies</b>	<b>Transaction ID : B79DBA3A210454BE586B</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 11 / 2014</b>
Mailing Address 1911 Epps Bridge Parkway		Amount of Each Disbursement this Period <b>28.32</b>
City <b>Athens</b>	State <b>GA</b>	
Zip Code <b>30606-6130</b>	Purpose of Disbursement <b>Event Supplies</b>	<b>Transaction ID : B04BD331D926C4E5C920</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Benjamin Stout</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 15 / 2014</b>
Mailing Address 3010 Waterford Dr.		Amount of Each Disbursement this Period <b>101.03</b>
City <b>Gainesville</b>	State <b>GA</b>	
Zip Code <b>30504-3900</b>	Purpose of Disbursement <b>See Below</b>	<b>Transaction ID : BBB00AD4C4B454229BCF</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>101.03</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Home Depot</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2014
Mailing Address 2150 West Spring St.		Amount of Each Disbursement this Period 101.03
City Monroe	State GA	
Zip Code 30655-3195		[MEMO ITEM]
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		
Purpose of Disbursement		
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	123862.07

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 73			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Jody Hice for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Evelyn Griffin</b>			Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2014</b>	
Mailing Address 3207 Groveland Ln			Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : B743CAA9D2F94405C9B5</b>	
City Houston	State TX	Zip Code 77019-3219		
Purpose of Disbursement Refund: Refund			Category/ Type	
Candidate Name				
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>B.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement			Category/ Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement			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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	1000.00