FEC FORM 3	AND DI	T OF RE SBURSE Authorized Con	MENTS			CEIVED
1. NAME OF COMMITTEE (ir	TYPE OR PRIM		kample: If typing, typ ver the lines.	e 12FE4	1M5	IL CENTER-
ADDRESS (number a Check if di than previo reported. (/ 2. FEC IDENTIFI	ifferent CT CA	MALLER!			B/52	
(a) Quarterly F April 1 July 19 Octobe	EPORT (Choose One) Reports: 5 Quarterly Report (Q1) 5 Quarterly Report (Q2) er 15 Quarterly Report (Q3) y 31 Year-End Report (YE)	Election or	E-Election Report for Primary (12P) Convention (12C) M M / D ST-Election Report for	Gener Speci		Runoff (12R) in the State of
Termin	ation Report (TER)	Election or		Runof		Special (30S) in the State of
Type or Print Name Signature of Treasur	examined this Report and to of Treasurer	THAN A	nowledge and belief 2VSSO WOTT	Date	to the penalties	3'20l'X

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FEC Form 3 (Revised 02/2003)       of Receipts and Disbursements       Page 2         Write or Type Committee Name       COWMM IT C. TO Elect Watthey RUSSO US HOUSE Get.         DISTIFICT 1 2012						
Re	eport	Covering the Period: From:	61,01,	2012	™: 06′30′201	2
				COLUMN A This Period	COLUMN B Election Cycle-to-Date	
6.	Net	Contributions (other than loans)	<u> </u>			
	(a)	Total Contributions (other than loans) (from Line 11(e))	 5	1,285-	, 1,285	
	(b)	Total Contribution Refunds (from Line 20(d))	<b>.</b>	a na anna anna anna anna anna anna ann	ματολογιατικό του του του του 14 Ξεταπολογιατικό (1910, 11 του 11 τ	
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	1112 - 112 1. m. t. <b>1</b> 2 - 1	1285-	, 1,285	ب
	Net	Operating Expenditures				
	(a)	Total Operating Expenditures (from Line 17)	 . <b>,</b> .	an a		
	(b)	Total Offsets to Operating Expenditures (from Line 14)	<b>3</b>	ar Ar Dr Dr S F	·.	
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))		ur en		
3.		h on Hand at Close of orting Period (from Line 27)	аны, алы алы Салы <b>у</b> а	2,176		
€.	the	nts and Obligations Owed <b>TO</b> Committee (Itemize all on edule C and/or Schedule D)	<b>9</b>	n na ser se		
0.	the	ts and Obligations Owed <b>BY</b> Committee (Itemize all on edule C and/or Schedule D)	, é	26.850 -		

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

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

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	FEC Form 3 (Revised 12/2003)	of Receipts	Page 3
	DIST 1	2012	KUSSO US HOUSE G
Re	port Covering the Period: From: Ö	9'01'2012 1	··· 06 '30'201'2
	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
1	(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	, <b>750</b> ,535	750
	<ul> <li>(ii) Unitemized</li> <li>(iii) TOTAL of contributions from individuals</li> </ul>	, 535 , 1,285	\$35 1285
	<ul> <li>(b) Polltical Party Committees</li> <li>(c) Other Political Committees         <ul> <li>(such as PACs)</li> </ul> </li> </ul>		
	<ul> <li>(d) The Candidate</li> <li>(e) TOTAL CONTRIBUTIONS</li> <li>(other than loans)</li> <li>(add Lines 11(a)(iii), (b), (c), and (d))</li> </ul>	1.285-	/285-
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	n an <b>Arrow Arrow Arrow</b> arrow arrow arrow arrow arrow arrow arrow <del>a</del> rrow arrow ar	
	LOANS: (a) Made or Guaranteed by the Candidate	, 24,300	, 24,300
	<ul> <li>(b) All Other Loans</li> <li>(c) TOTAL LOANS</li> <li>(add Lines 13(a) aπd (b))</li> </ul>	, 2.4.300 -	, 24,300
	OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	no na serie de la serie de Serie de la serie	1. 18 - 18 - 18 - 18 - 18 - 18 18 - 18 - 1
	OTHER RECEIPTS (Dividends, Interest, etc.)	un u	eser une der sonstand och sonstand 1 Ber Molitikes⊉ → sonst
	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	, 25,585. –	, 25,585.~

	FEC Form 3 (Revised 02/2003)	DETAILED SUMMARY PAGE of Disbursements	Page 4
	II. DISBURSEMENTS	COLUMN A Total This Peried	COLUMN B Election Cycle-to-Date
17	OPERATING EXPENDITURES	, 21,212-	21212 -
	TRANSFERS TO OTHER		
	AUTHORIZED COMMITTEES	5 <b>7</b> 5 5	<b>,</b> , .
9.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate		
		<b>, , .</b>	, , ,
	(b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS	<b>3 3 3 5 5</b>	<b>; ; ;</b> •
	(add Lines 19(a) and (b))	<b>9 9</b>	19 ann 1 <b>2 7 -</b>
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other		
	Than Political Committees	y y and a set of the set of th	<b>, , .</b>
	<ul> <li>(b) Political Party Committees</li> <li>(c) Other Political Committees</li> <li>(such as PACs)</li> </ul>	<b>391</b>	
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	3 3 <del>.</del>	, , ,
21.	OTHER DISBURSEMENTS Sch. J.	, 2,550	, 2,550-
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	, 23,762 -	,23,762
	III. CASH SU	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	iting period	, 353.—
4	TOTAL RECEIPTS THIS PERIOD (from Line 1	, 25.585	
25.	SUBTOTAL (add Line 23 and Line 24)		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	n Line 22)	, 23,762
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		, 2.1.76 -

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PAGE OF FOR LINE NUMBER: SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c 11d Detailed Summary Page 12 13a 13b 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Elect Nathan Kusso US House Ga Dist 2011 Full Name dle Initial) (Last Α. Date of Receipt Mailing Address 29 2012 City State Code I N FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. Name of Employer 250 -Occupation Receipt For: Election Cycle-to-Date Primary General Ξ Other (specify) s Full Name (Last, First, Middle, hitiai) Date of Receipt DANK (19a) В. Mailing Ad 05'25'2012 allo Zip Code City FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. 500= Name of Employer Occupation **Receipt For:** Election Cycle-to-Date Primary General 500 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt C. Mailing Address DD/ City State Zip Code FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. • : t se statute et e Name of Employer Occupation 1. . e . . . . . 5. 5 Receipt For: **Election Cycle-to-Date** Primary General Other (specify) . 9 SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)..... D

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FOR LINE NUMBER: PAGE OF SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the ITEMIZED DISBURSEMENTS J17 19b 18 19a Detailed Summary Page 20a 20b 20c 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) IBSO US HOUSE Ga DIS 012 Full Name (Last, First, Middle, Ini Date of Disbursement Α. Mailing City State Amount of Each Disbursement this Period Purpose ŧ :! Candidate N Category/ Type Office Sought: oursement For: House Senate Primary General Other (specify) President State District: Full Name (Last. First, Middle Initial) Date of Disbursement Β. 05 201 Mailir Zip Code City Amount of Each Disburgement this Period ٢ ろ 37 Purpose Candida <u>s</u>s 0 Category/ Туре **Disbursement For:** Office /Sou Primary Senate General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Date of Disbursement C. 6 Zip Code Amount of Each Disbursement this Period 10 - . . . Purpos Candi Category/ js\$0 Type Office Sought: Disbursement For: House Primary General Senate Other (specify) President State District: SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only) .....  $\alpha$ FE5AN018 FEC Schedule B (Form 3) (Revised 02/2009)

FOR LINE NUMBER: PAGE OF SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **ITEMIZED DISBURSEMENTS** 17 18 19a 19b **Detailed Summary Page** 20b 20a 20c 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) usso us th ገእለ Full Name First, Middle Initial) l.ast. Date of Disbursement Α. 302 04 Mailing City State Zip Code Amount of Each Disbursement this Period Purpose of D **80** " Candidate M Category/ ଟ୍ଟର ପ Type Office Sought ursement For: Primary General Senate President Other (specify) District: State Full Name Last, First, Middle Initial) Date of Disbursement Β. 04 20 Mailin City State Amount of Each Disbursement this Period Purpos Candidate\_ me Category/ <u>US 50</u> Type Office Disbursement For: S General Senate Primary Other (specify) President Stat District: Full Name (Last, First, Middle Initial Date of Disbursement C. Mailing Add City <u>1318</u> Amount of Each Disbursement this Period Purpo 3,000 Candidate Category/ Туре Office Sought House sbursement For: Primary General Senate Other (specify) ; President District: State: SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only) .....

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PAGE OF FOR LINE NUMBER: SCHEDULE B (FEC Form 3) (check only one) Use separate schedule(s) for each category of the ITEMIZED DISBURSEMENTS **1**17 18 19a 19b **Detailed Summary Page** 20a 20b 20c 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) isso US House Ga **9**1 Full Name (Last, First. Middle Initial Date of Disbursement Α. Mailing Address Oð City Zip Code State Amount of Each Disbursement this Period Purpose of Dist @V^A ¢ 114, 69 Candidate Name Category/ U Туре Office Sought: Disbursement For: General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Β. Maili .05 ന 1600 N Q City Amount of Each Disbursement this Period Purpo 00 Candidate Category/ Туре Office Sought: House Disbursement For: Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing City State Zip Code Amount of Each Disbursement this Period n7 Purp 00 Candidate Category/ Type **Disbursement For:** Office Sought: House General Primary Senate Other (specify) President State: District: SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only) .....

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FEC Schedule B (Form 3) (Revised 02/2009)

PAGE OF FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) **ITEMIZED DISBURSEMENTS** for each category of the 17 18 19a 19b **Detailed Summary Page** 20a 20b 20c 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 ournoses, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) US House G  $m_{2}$ 9 Full Name (L ast, First, Middle Initial) Date of Disbursement Α. Mailing 3 A City Amount of Each Disbursement this Period Purpose of Dis . . . . . 00 Candidate Nam Category/ Type Office Sought: ent For: louse Jiehi Senate Primary General į President Other (specify) District: First, Middle Initial) Full Date of Disbursement В. Mailing City Amount of Each Disbursement this Period Purpose Candidate Name Category/ 150 Type House Office Sought: **Disbursement For:** Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. M 24 Mailing Addres 00 City Żip Code Amount of Each Disbursement this Period Purpose 5000 Candidate Category/ Type Office Sought: Disbursement For: House Primary General Senate Other (specify) President District: State: 🦄 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE OF SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **ITEMIZED DISBURSEMENTS** 17 18 19a 19b Detailed Summary Page 20; 20b 20c 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) KSO US HOUSE Ga D Full Name Date of Disbursement Α. Mailing Address 06 12 20 City State Amount of Each Disbursement this Period Purpos 25000 Candidate Category/ Type Office Sought: Disbursement For: louse General Senate Primary President Other (specify) State District: Full Name (Last, First, Middle Initial) Date of Disbursement Β. 12 20 Mailing 6 City State Zip Code Amount of Each Disbursement this Period Purp 2,2000 Can Category/ Type Office ursement For: General Senate Primary President Other (specify) District: State: Full Name First, Middle (Initial) .ast. Date of Disbursement C. 06 18 20 Mailing City State Amount of Each Disbursement this Period Purp Candi Category/ Type Disbursement For: Office Sought: House General Primary Senate Other (specify) President State: District: \$2,525 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only) ..... ٢

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FEC Schedule B (Form 3) (Revised 02/2009)

PAGE OF FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **ITEMIZED DISBURSEMENTS** 19a 17 18 19b **Detailed Summary Page** 20a 20b 20c 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 ourcoses, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Russo US House Ga Dist , 2012 Full Name Date of Disbursement A. 06 18 2012 Mailing Ad City State Zip Code Amount of Each Disbursement this Period Purpose Candidate Name Category/ Type Office Sought: **Disbursement For:** House Primary Senate General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Β. 06272012 Mailing Citv State Code Amount of Each Disbursement this Period \$ 80 00 Candidate Name Category/ Type Office Sought: House **Disbursement For:** General 2 Primary Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial Date of Disbursement 6LC C. SAC Mailing Addre City Amount of Each Disbursement this Period Purpose of ,119 Candidate Category/ Type × House Office Sought: **Disbursement For:** General Senate Primary Other (specify) President State: District: SUBTOTAL of Disbursements This Page (optional) ..... Ø TOTAL This Period (last page this line number only) .....

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FEC Schedule B (Form 3) (Revised 02/2009)

CHEDULE C (FEC F OANS	Form 3)		for e	separate schedule(s ach category of the iled Summary Page	FOR LINE	
	tollec	t Nathon	Russo		Election:	5/1201
Mailing Address	XAJEHM X 203	<u>4</u> -74		F	Primary General Other (speci	fy) 🔻
city ST SIME	ns B	Ga. 3	Code	<u> </u>		
Original Amount of Loan		Cumulative Payme	nt To Date	Balan	ce Outstanding a	t Close of This
Date Incurred	2012		Due	Interest Rate	<b>%</b> (apr)	Secured:
List All Endorsers or Guar 1. Full Name (Last, First, N		to Loan Source		f Employer	··	
Mailing Address			Occupat			
City	State	ZIP Code	Amount Guarante Outstand			
2. Full Name (Last, First, M	iddle Initial)			f Employer		
Mailing Address		2	Occupat	ion	<u> </u>	
City	State	ZIP Code	Amount Guaranto Outstano		, ,	
3. Full Name (Last, First, M	iddle Initial)	. <u> </u>	Name of	f Employer	- <u></u>	<u></u>
Mailing Address		<u></u>	Occupat	ion	<u>.                                    </u>	<u> </u>
City	State	ZIP Code	Amount Guarante Outstand		5 T	4
4. Full Name (Last, First, M	ddle Initial)		Name of	Employer	-	
Mailing Address			Occupat	ion		
City	State	ZIP Code	Amount Guarante Outstand		,	n
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FEC Schedule C (Form 3) (Revised 02/2003)

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CHEDULE C (FEC Form 3) DANS	Use separate schedule(s) for each category of the	
JANS	Detailed Summary Page	
	Russo us House	Ga Disti zon
LOAN SOURCE Full Name (Last, First, Middle Initial)		Election: Primary General
Mailing Address POBOX 20274		Other (specify) ▼
City Structure Ist State ZI	1522	
Original Amount of Loan Cumulative Payme	ent To Date Balanc	e Outstanding at Close of This Per
# 700 - Ø	5. <sup>.</sup> "	200 -
TERMS Date Incurred Date	Due Interest Rate	Secured:
04232012 Wol	VE Ø.	% (apr)
List All Endorsers or Guarantors (if any) to Loan Source	Nome of Complexed	
1. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount Guaranteed	<u> </u>
City State ZIP Code	Outstanding:	<b>,</b>
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	
City State ZIP Code	Guaranteed Outstanding: 7	
3. Full Name (Last, First, Middle Initial)	Name of Employer	· · · · · · · · · · · · · · · · · · ·
Mailing Address	Occupation	
	Amount	· · ·
City State ZIP Code	Guaranteed Outstanding:	ş
4. Full Name (Last, First, Middle Initial)	Name of Employer	· · · · · · · · · · · · · · · · · · ·
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding:	•
UBTOTALS This Period This Page (optional)	·····	* 700 00
<u>£</u>		

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	PAGE OF
SCHEDULE C (FEC Form 3)	Use separate schedule(s) FOR LINE NUMBER:
LOANS	for each category of the (check only one)
	Detailed Summary Page
Committee (In Full) Let Nathan Russe	5 US Anvse Ga Dist 1 2012
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
ROSSO, MATHAN, C	General
Mailing Address PO BOAS 20274	Other (specify)
	Code 1522
Original Amount of Loan Cumulative Payment	t To Date Balance Outstanding at Close of This Perio
5,400. N	ONE
TERMS Data lagurad	Due Interest Rate Secured:
Date Incurred Date D	Due     Interest Rate     Secured:       NONE     Yes     Yes
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding: '7 7
SUBTOTALS This Period This Page (optional)	5,400
TOTALS This Period (last page in this line only)	······
Carry outstanding balance only to LINE 3, Schedule D, for this line	. If no Schedule D, carry forward to appropriate line of Summary.

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CHEDULE C (FE OANS	C Form 3)		Use separate for each cate Detailed Sum	gory of the	.: PA FOR LINE N (check only	IUMBER:	
IAME OF COMMITTEE (In	to Elect	Nathon Rus	so Usta	se Ga	Disti	2017	<u>L</u>
LOAN SOURCE Full I	Name (Last, First, Mic			1	ction: Primary General Other (specify	0 —	
PO	BOK 20	State ZIP (	Dede				
city 575	rmone Ex	Ga 31	522~				
Original Amount of Lo		Cumulative Payment		Balance (	Dutstanding at	10FN	is P
TERMS Date Inc	curred	Date Du	e Inte	rest Rate		Secured:	
060	82012	NON	<b>S</b>	Ø.	% (apr)	□ Yes `	Þ
List All Endorsers or (		b Loan Source					
1. Full Name (Last, Fir	st, Middle Initial)		Name of Employe	ər			
Mailing Address			Occupation			<u> </u>	
City	State	ZIP Code	Amount Guaranteed Outstanding:	3	\$	•	
2. Full Name (Last, Firs	st, Middle Initial)	· · · · · · · · · · · · · · · · · · ·	Name of Employe	er			
Mailing Address		<u></u>	Occupation				
City	State :	ZIP Code	Amount Guaranteed Outstanding: .	5	•		
3. Full Name (Last, Firs	t, Middle Initial)	<u> </u>	Name of Employe	ər	<u> </u>		
Mailing Address		<u> </u>	Occupation			<u></u>	
City	State	ZIP Code	Amount Guaranteed Outstanding:		<del>.</del>	4	
4. Full Name (Last, Firs	t, Middle Initial)		Name of Employe	nr	-		
Mailing Address			Occupation				
	State	ZIP Code	Amount Guaranteed Outstanding:	,	,		
City						00	<u> </u>

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FEC Schedule C (Form 3) (Revised 02/2003)

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CHEDULE C (FEC Form 3)		Use separate sch			AGE IUMBER:	OF
DANS		for each category Detailed Summar		(check only	one)	13a 13b
AME OF COMMITTEE (IN FUIL) Committee to Elect	Nathan RU	sso US Hou	se Go	Disti	70	12
LOAN SOURCE Full Name (Last, First, I				ction: Primary		
Mailing Address	ATTHAN C			General Other (specify	a	
PO BOX 20	274				// ▼	
city StSIMOMS IS/201	State ZIP C	Code	•			
Original Amount of Loan	Cumulative Payment	To Date	Balance	Outstanding at	Close of	This Peri
3,000	None		4	3,,000	~	-
TERMS Date Incurred	Date Du	e Interest	Rate	•	Secure	ed:
06 25 12	Nen	E k	\$ <u>.</u>	% (apr)	Ye	, ×
List All Endorsers or Guarantors (if any 1. Full Name (Last, First, Middle Initial)	) to Loan Source	Name of Employer				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	;	L	
2. Full Name (Last, First, Middle Initial)	<u>, , , , , , , , , , , , , , , , , , , </u>	Name of Employer				
Mailing Address		Occupation				
		Amount Guaranteed				
City State	· ZIP Code	Outstanding: -	. <u>.</u>	r	۰.	
3. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Arnount				<u></u>
City State	ZIP Code	Guaranteed Outstanding:	7	:	٦	
4. Full Name (Last, First, Middle Initial)		Name of Employer		-		
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:		3	ţ	
JBTOTALS This Period This Page (optiona	)	······	<u></u>	3,0	0Y-	e de la companya de
OTALS This Period (last page in this line of	nh/)	•				

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FEC Schedule C (Form 3) (Revised 02/2003)

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SCHEDULE C (FEC Form 3)	Use separate schedule(s)
LOANS	for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one) 13a
Committee (In Full) Committee to Elect Nathan PUSS	o USHouse Ga Disti 2012
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: Primary General
Mailing Address PO Box 20274	Cther (specify) ▼
City ST SIMONS IS Gra 31	Code
Original Amount of Loan Cumulative Paymen	At To Date Balance Outstanding at Close of This Period
TERMS Date Incurred Date I	0,
0425 2012 NO	VE 6 . % (apr) . ves No
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 7
2. Full Name (Last, First, Middle Initial)	Outstanding: 7 Name of Employer
Mailing Address	Occupation
City State ZIP Code	Arnount Guaranteed Outstanding: ,
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	\$3,000 \$34,3000
TOTALS This Period (last page in this line only)	· # 24,300 00
Carry outstanding balance only to LINE 3, Schedule D, for this line	. If no Schedule D, carry forward to appropriate line of Summary.

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ł No.14 -PAGE OF SCHEDULE D (FEC Form 3) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** 10 NAME OF COMMITTEE (In Full) Nathan Russo US House 12012 n M 00 Nature Full Name of Debtor or Creditor Α. Mailing Zip Code City Outstanding Balance Beginning This Period pount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0 B. Full Name (Last. First, Middle Initial) of Debtor or Creditor Nature of Mailing Ad City Code State 7in Outstanding Balance Beginning This Period mount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name First, Middle Initial) of Debtor or Creditor (Last P Mailing Add Zip Code State City 3 Outstanding Balance Beginning This Period Amogint Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1) SUBTOTALS This Period This Page (optional) ..... 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

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PREPARER (3/2005)	DATE PREPARED

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