PAGE 1 / 2

## 48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Rick W. Allen for	Congress							
ADDRESS (number and street) P.	O. Box 338							
CITY STATE			ZIP CODE					
Augusta GA			30903-0338					
2. NAME OF CANDIDATE Allen, Richard, W, ,			3. OFFICE SO House	3. OFFICE SOUGHT (State and District)   House GA 12			4. FEC IDENTIFICATION NUMBER C00504019	
5. IS THIS AN AMENDMENT?	NO, THIS IS A NE	W FILING	YES, IT AME	NDS THE	NOTICE FILED ON	ı	/	/
a. FULL NAME Rollins, Rebecca, , Mrs.,			Name of Emp None	Name of Employer None			Date (month, day, year)	Amount
MAILING ADDRESS P.O. Box 831	Transaction	Transaction ID : 68E6781BF93844CA5			10/22/2018	1000.00		
CITY	STATE	ZIP CODE	Occupation					
Lunna	<b>C</b> A	00400 0004	Housewife					
Lyons	GA	30436-0831					Data (manth	Amount
B. FULL NAME Fazio, Thomas, J., ,			Name of Emp TJF Gold	Name of Employer TJF Gold			Date (month, day, year)	Amount
MAILING ADDRESS 401 Main St N						1	10/22/2018	1000.00
			Transaction	ID : 6B	DAE030E0DB	A429		
CITY	STATE	ZIP CODE	Occupation	Occupation				
Hendersonville	NC	28792-4903	Course Des	Course Designer				
c. full NAME Doumar, Raymond, J., Mr.,			Name of Emp Self	Name of Employer Self			Date (month, day, year)	Amount
MAILING ADDRESS One 10th Street, Suite 700				-			10/22/2018	1000.00
				ID : 69	8CE5A35BCA2	2481		
CITY	STATE	ZIP CODE	Occupation	Occupation				
Augusta	GA	30901-0119	Attorney					
D. FULL NAME Sanders, Harvey, J, Dr.,			Name of Emp Self	Name of Employer Self			Date (month, day, year)	Amount
MAILING ADDRESS 2 Huntington Pl				-			10/22/2018	1000.00
2 Huntington Pl		Transaction	Transaction ID : 63F622AC1EEB741F					
CITY	STATE	ZIP CODE						
Wavnesboro GA 30830-5414		Physician	Physician					
E. FULL NAME Westrock PAC			Name of Emp	Name of Employer			Date (month, day, year)	Amount
MAILING ADDRESS 504 Thrasher St			Transaction	Transaction ID : 679EFBC1466CA48B			10/22/2018	4000.00
CITY STATE ZIP CODE			Occupation		1-1010			
Norcross	GA	30071-1967						
SIGNATURE (optional) Meybohm, E. G., , ,	1	1	[Electronically	Filed]	<b>DATE</b> 10/24/2018		Federal E 999 E Street, N	information contact: Election Commission W, Washington, DC 20463 4-9530, Local 202-694-1100

Any information copied from reports and statements filed under the Federal Election Campaign Act 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.	EC FORM 6 (Revised 03/2016)
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1. NAME OF COMMITTEE IN FULL Rick W. Allen for Congress	7			
ADDRESS (number and street) P.O. Box 338		-		
CITY, STATE, and ZIP CODE		-1		
Augusta	GA 30903-0338	continuation page		
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION N	IUMBER	
Allen, Richard, W, ,	House GA 12	C00504019		
5. IS THIS AN AMENDMENT?	YES, IT AMENDS THE NOTICE FILED ON	//		
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount	
Anderson, Frank, , Mr.,	RBW Logistics	day, year)		
3019 Lake Forest Drive		10/23/2018	2700.00	
	Transaction ID : 6F6F544D167F447B Occupation	B97B		
Augusta GA 30909-302				
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	
	Occupation			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	
	Occupation			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	
	Occupation			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	
	Occupation	_		

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