

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5  
Nunn Senate Victory

ADDRESS (number and street) 120 Maryland Avenue NE  
Washington DC 20002  
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00549022

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on M M / D D / Y Y Y Y Y Y in the State of  

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2014 through M M / D D / Y Y Y Y Y Y 09 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Yates Baroody

Signature of Treasurer

*Yates Baroody*

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y 08 / 21 / 2015

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Nunn Senate Victory**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="0.02"/>	<input type="text" value="0.02"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2918.87"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="245611.00"/>	<input type="text" value="292551.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="248529.87"/>	<input type="text" value="292551.02"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="240942.65"/>	<input type="text" value="284963.80"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="7587.22"/>	<input type="text" value="7587.22"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
**Nunn Senate Victory**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	245211.00	292026.00
(ii) Unitemized .....	400.00	525.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	245611.00	292551.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	245611.00	292551.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	245611.00	292551.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	245611.00	292551.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	24942.65	44382.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	24942.65	44382.80
22. Transfers to Affiliated/Other Party Committees.....	216000.00	240581.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	240942.65	284963.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	240942.65	284963.80

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	245611.00	292551.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	245611.00	292551.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	24942.65	44382.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	24942.65	44382.80

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 18
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**Nunn Senate Victory**

**A. Monta Ellis**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10960 Wilshire Blvd.  
Fl. 5  
City Los Angeles State CA Zip Code 90024  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Dallas Basketball Occupation Professional Athlete  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **20000.00**

Date of Receipt  
09 / 04 / 2014  
**Transaction ID : SA11AI-51**  
Amount of Each Receipt this Period  
**20000.00**

**B. Anne Barge Clegg**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1717 N. Decatur Rd. NE  
Unit 408  
City Atlanta State GA Zip Code 30307  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Anne Barge Clegg Designs Occupation Owner  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **10000.00**

Date of Receipt  
09 / 08 / 2014  
**Transaction ID : SA11AI-53**  
Amount of Each Receipt this Period  
**10000.00**

**C. Laura Richards**  
Full Name (Last, First, Middle Initial)  
Mailing Address 100 Blandenberg Rd.  
City Carrollton State GA Zip Code 30117  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Friends of the Carrollton Greenbelt Occupation Founder  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **20000.00**

Date of Receipt  
09 / 08 / 2014  
**Transaction ID : SA11AI-54**  
Amount of Each Receipt this Period  
**20000.00**

**SUBTOTAL** of Receipts This Page (optional)..... **50000.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Nunn Senate Victory**

**A. Herman Russell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 275 13th Street SE  
 Apt. 912  
 City Atlanta State GA Zip Code 30309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer H.J. Russell and Co. Occupation Chairman  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **20000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2014  
**Transaction ID : SA11AI-55**  
 Amount of Each Receipt this Period  
**20000.00**

**B. Sylvia Russell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 275 13th Street SE  
 Apt. 912  
 City Atlanta State GA Zip Code 30309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **20000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2014  
**Transaction ID : SA11AI-56**  
 Amount of Each Receipt this Period  
**20000.00**

**C. Mack Wilbourn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1709 Friar Tuck Rd. NE  
 City Atlanta State GA Zip Code 30309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Mack II, Inc. Occupation Owner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **20000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2014  
**Transaction ID : SA11AI-57**  
 Amount of Each Receipt this Period  
**20000.00**

**SUBTOTAL** of Receipts This Page (optional)..... **60000.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 18
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Nunn Senate Victory**

Full Name (Last, First, Middle Initial) <b>A. Rebecca Jones-Jemison</b>		Date of Receipt 09 / 09 / 2014 <b>Transaction ID : SA11AI-59</b>
Mailing Address 3070 Windward Plaza #134		Amount of Each Receipt this Period 20000.00
City Alpharetta	State GA	Zip Code 30005
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self-Employed	Occupation Private Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

Full Name (Last, First, Middle Initial) <b>B. Vicki Palmer</b>		Date of Receipt 09 / 09 / 2014 <b>Transaction ID : SA11AI-60</b>
Mailing Address 3535 Peachtree Rd. NE #520-427		Amount of Each Receipt this Period 10000.00
City Atlanta	State GA	Zip Code 30326
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer The Palmer Group	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) <b>C. June Tompkins</b>		Date of Receipt 09 / 09 / 2014 <b>Transaction ID : SA11AI-61</b>
Mailing Address 3417 Tuxedo Rd. NW		Amount of Each Receipt this Period 20000.00
City Atlanta	State GA	Zip Code 30305
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer N/A	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER: PAGE 9 OF 18  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Nunn Senate Victory**

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

Mailing Address 1575 Northside Dr. NW  
#200

City Atlanta State GA Zip Code 30318

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

Name of Employer TriBridge Residential Occupation Managing Executive Partner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
18500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2014

Transaction ID : SA11AI-62

Amount of Each Receipt this Period  
18500.00

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

Mailing Address 10715 Stroup Rd.

City Roswell State GA Zip Code 30075

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

Name of Employer TriBridge Residential Occupation Managing Partner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2014

Transaction ID : SA11AI-63

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 1325 Monte Carlo Dr. NW

City Atlanta State GA Zip Code 30327

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

Name of Employer nsoro, LLC Occupation Founder

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014

Transaction ID : SA11AI-71

Amount of Each Receipt this Period  
20000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Nunn Senate Victory**

Full Name (Last, First, Middle Initial) <b>A. John Palmer</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2014
Mailing Address 3630 Peachtree Rd. NE Unit 3301		<b>Transaction ID : SA11AI-72</b>
City Atlanta	State GA	Zip Code 30326
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10000.00	
Name of Employer EDP Enterprises, Inc.	Occupation Owner	Aggregate Year-to-Date ▼ 10000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Billye Aaron</b>		Date of Receipt MM / DD / YYYY 09 / 18 / 2014
Mailing Address 1611 Adams Drive SW		<b>Transaction ID : SA11AI-74</b>
City Atlanta	State GA	Zip Code 30311
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20000.00	
Name of Employer N/A	Occupation Retired	Aggregate Year-to-Date ▼ 20000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Carl Ware</b>		Date of Receipt MM / DD / YYYY 09 / 18 / 2014
Mailing Address 1681 Ryland Trail SW		<b>Transaction ID : SA11AI-75</b>
City Atlanta	State GA	Zip Code 30331
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10000.00	
Name of Employer N/A	Occupation Retired	Aggregate Year-to-Date ▼ 10000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 OF 18
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Nunn Senate Victory**

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

Mailing Address 2221 Peachtree Rd. NE  
Ste. D-301

City Atlanta State GA Zip Code 30309

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

Name of Employer Hideoki, LLC Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2014

Transaction ID : SA11AI-79

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 320 Melrose Ave.

City Mill Valley State CA Zip Code 94941

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

Name of Employer Self-Employed Occupation Therapist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2014

Transaction ID : SA11AI-45

Amount of Each Receipt this Period  
211.00

Earmarked Contribution: See Below.

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

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
736.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2014

Transaction ID : SA11AI-45-10000

Amount of Each Receipt this Period  
211.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5211.00
<b>TOTAL</b> This Period (last page this line number only).....	245211.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Nunn Senate Victory**

Full Name (Last, First, Middle Initial)

**A. Bank of America Merrill Lynch**

Mailing Address PO Box 15284

City State Zip Code  
Wilmington DE 19850

Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	15	/	2014

Transaction ID : SB21B-47

Amount of Each Disbursement this Period

24.84
-------

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St.

City State Zip Code  
Somerville MA 02144

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	23	/	2014

Transaction ID : SB21B-43

Amount of Each Disbursement this Period

3.95
------

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St.

City State Zip Code  
Somerville MA 02144

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	31	/	2014

Transaction ID : SB21B-46

Amount of Each Disbursement this Period

12.29
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

41.08
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Nunn Senate Victory**

Full Name (Last, First, Middle Initial)

**A. Bank of America Merrill Lynch**

Mailing Address PO Box 15284

City State Zip Code  
Wilmington DE 19850

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 15 / 2014

**Transaction ID : SB21B-58**

Amount of Each Disbursement this Period

28.62

Full Name (Last, First, Middle Initial)

**B. Emily Pomeranz**

Mailing Address 120 Maryland Avenue NE

City State Zip Code  
Washington DC 20002

Purpose of Disbursement  
Travel Per Diem

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2014

**Transaction ID : SB21B-48**

Amount of Each Disbursement this Period

235.00

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St.

City State Zip Code  
Somerville MA 02144

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 28 / 2014

**Transaction ID : SB21B-50**

Amount of Each Disbursement this Period

3.95

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

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

267.57

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Nunn Senate Victory**

Full Name (Last, First, Middle Initial)

**A. DNC Travel Offset Account**

Mailing Address 430 S. Capitol St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2014

**Transaction ID : SB21B-52**

Amount of Each Disbursement this Period

20179.86

Full Name (Last, First, Middle Initial)

**B. Gloriosa Signature Events, Inc.**

Mailing Address PO Box 33738

City Decatur State GA Zip Code 30033

Purpose of Disbursement  
Catering/Facilities/ Event Costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2014

**Transaction ID : SB21B-64**

Amount of Each Disbursement this Period

2154.05

Full Name (Last, First, Middle Initial)

**C. Gloriosa Signature Events, Inc.**

Mailing Address PO Box 33738

City Decatur State GA Zip Code 30033

Purpose of Disbursement  
Catering/Facilities/ Event Costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2014

**Transaction ID : SB21B-65**

Amount of Each Disbursement this Period

1362.11

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

23696.02

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Nunn Senate Victory**

Full Name (Last, First, Middle Initial)

**A. Emily Pomeranz**

Mailing Address 120 Maryland Avenue NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2014

**Transaction ID : SB21B-66**

Amount of Each Disbursement this Period

25.35

Full Name (Last, First, Middle Initial)

**B. Quintin Jackson Photography**

Mailing Address 5190 Highland Lake Dr.

City College Park State GA Zip Code 30349

Purpose of Disbursement  
Photography Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2014

**Transaction ID : SB21B-67**

Amount of Each Disbursement this Period

325.00

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St.

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2014

**Transaction ID : SB21B-70**

Amount of Each Disbursement this Period

2.97

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

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

353.32

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Nunn Senate Victory**

Full Name (Last, First, Middle Initial)

**A. Bank of America Merrill Lynch**

Mailing Address PO Box 15284

City State Zip Code  
Wilmington DE 19850

Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : SB21B-88**

Amount of Each Disbursement this Period

567.98

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Bank of America - Visa**

Mailing Address PO Box 15731

City State Zip Code  
Wilmington DE 19886

Purpose of Disbursement  
Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2014

**Transaction ID : SB21B-73**

Amount of Each Disbursement this Period

539.20

Category/  
Type

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

**C. Delta Air Lines, Inc.**

Mailing Address 1030 Delta Boulevard

City State Zip Code  
Atlanta GA 30354

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2014

**Transaction ID : SB21B-73-10000**

Amount of Each Disbursement this Period

339.20

Category/  
Type

**[MEMO ITEM]**  
Memo Entry

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

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

567.98



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Nunn Senate Victory**

Full Name (Last, First, Middle Initial)

**A. Delta Air Lines, Inc.**

Mailing Address 1030 Delta Boulevard

City Atlanta State GA Zip Code 30354

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 25 / 2014

**Transaction ID : SB21B-73-20000**

Amount of Each Disbursement this Period

200.00

**[MEMO ITEM]**  
Memo Entry

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address PO Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 19 / 2014

**Transaction ID : SB21B-76**

Amount of Each Disbursement this Period

15.69

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St.

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2014

**Transaction ID : SB21B-78**

Amount of Each Disbursement this Period

0.99

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

16.68

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

24942.65

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Nunn Senate Victory**

Full Name (Last, First, Middle Initial)

**A. Democratic Senatorial Campaign Committee**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

Mailing Address 120 Maryland Avenue NE

**Transaction ID : SB22-80**

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

1	0	5	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Purpose of Disbursement  
Transfer

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Georgia Federal Elections Committee**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

Mailing Address PO Box 20442

**Transaction ID : SB22-81**

City Atlanta State GA Zip Code 30325

Amount of Each Disbursement this Period

9	2	0	0	0	0	0	0	0	0
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Purpose of Disbursement  
Transfer

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Nunn for Senate, Inc.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

Mailing Address 303 Peachtree St.  
Suite 5300

**Transaction ID : SB22-82**

City Atlanta State GA Zip Code 30308

Amount of Each Disbursement this Period

1	9	0	0	0	0	0	0	0	0
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Purpose of Disbursement  
Transfer

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

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

2	1	6	0	0	0	0	0	0	0
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2	1	6	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---