

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 John McCallum for Congress

ADDRESS (number and street) P O Box 20097 Saint Simons Island GA 31522 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00552463 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT GA 01

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) Termination Report (TER) (b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2014 through 03 / 31 / 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 Regina Mabry

Signature of Treasurer Regina Mabry [Electronically Filed] Date 04 / 15 / 2014

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 table with 8 columns and 1 row. FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**John McCallum for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	175016.00	438596.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	175016.00	438596.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	206777.55	265873.42
(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)).....	206777.55	265873.42
8. Cash on Hand at Close of Reporting Period (from Line 27).....	372801.25	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	200000.00	

**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

**John McCallum for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	163605.00	420835.00
(ii) Unitemized.....	11411.00	17761.00
(iii) TOTAL of contributions from individuals ▶	175016.00	438596.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	175016.00	438596.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	100000.00	200000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	100000.00	200000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	78.67
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	275016.00	638674.67

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	206777.55	265873.42
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 .....	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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	206777.55	265873.42

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	304562.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	275016.00
25. SUBTOTAL (add Line 23 and Line 24).....	579578.80
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	206777.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	372801.25

**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 148
	<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	

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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alexia Alarcon**

Mailing Address 4124 Club Drive NE

City Atlanta State GA Zip Code 30319

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

Name of Employer Self Employed Occupation Hair Dresser

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
 \_\_\_\_\_ 5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 30 / 2014

**Transaction ID : SA11AI.5164**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2600.00

Primary Runoff

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

Mailing Address 4124 Club Drive NE

City Atlanta State GA Zip Code 30319

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

Name of Employer Self Employed Occupation Hair Dresser

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  
 01 / 30 / 2014

**Transaction ID : SA11AI.5165**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2600.00

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

Mailing Address 125 Crestwicke Trace NE

City Atlanta State GA Zip Code 30319

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
 \_\_\_\_\_ 5200.00

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

**Transaction ID : SA11AI.5554**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2600.00

Primary Runoff

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

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

\_\_\_\_\_ 7800.00

\_\_\_\_\_

**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 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tracy S Anderson**

Mailing Address 125 Crestwicke Trace NE

City Atlanta State GA Zip Code 30319

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

Name of Employer Vivex Biomedical, Inc. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7700.00**

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

**Transaction ID : SA11AI.5322**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address 125 Crestwicke Trace NE

City Atlanta State GA Zip Code 30319

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

Name of Employer Vivex Biomedical, Inc. Occupation CEO

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 / 11 / 2014**

**Transaction ID : SA11AI.5326**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 1696 Murray Cove Road

City Tiger State GA Zip Code 30576

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

Name of Employer Self Employed Occupation Investor

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 / 26 / 2014**

**Transaction ID : SA11AI.5487**

Amount of Each Receipt this Period  
**250.00**

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

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

**2850.00**

**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 7 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joel Arline**

Mailing Address 261 St. James Avenue

City St. Simons Island State GA Zip Code 31522

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

Name of Employer Arline & Wiggins CPAs LLC Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5211**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 2238 Gumlog Road

City Wrightsville State GA Zip Code 31096

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

Name of Employer Self Employed Occupation Timber Buyer/Harvesting

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5367**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 5334 Harbor Town Drive

City Dallas State TX Zip Code 75287

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

Name of Employer Starkey Laboratories Occupation SVP

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5635**

Amount of Each Receipt this Period  
 2600.00  
 Primary Runoff

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

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

3350.00

**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 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tani Austin**

Mailing Address 5334 Harbor Town Drive

City State Zip Code  
Dallas TX 75287

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

Name of Employer Occupation  
Starkey Laboratories SVP

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 : SA11AI.5636**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 191 Peachtree Street, #4075

City State Zip Code  
Atlanta GA 30303

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

Name of Employer Occupation  
MNN Internet

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 10 / 2014

**Transaction ID : SA11AI.5135**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P O Box One

City State Zip Code  
Macon GA 31202

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

Name of Employer Occupation  
McNair, McLemore, Middlebrooks CPA

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 / 26 / 2014

**Transaction ID : SA11AI.5219**

Amount of Each Receipt this Period  
250.00

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

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

3100.00

**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 9 OF 148
	<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)  
**John McCallum for Congress**

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

Mailing Address 483 Cedar Walk

City State Zip Code  
Saint Simons Island GA 31522

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

Name of Employer Occupation  
Barbara Jean's Restaurant 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 / 21 / 2014

**Transaction ID : SA11AI.5387**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 107 Bentwood Circle

City State Zip Code  
Macon GA 31210

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

Name of Employer Occupation  
Homemaker Homemaker

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 : SA11AI.5266**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 955 Lexington Avenue

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
J. S. Bean & Son LLC Investments

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 / 10 / 2014

**Transaction ID : SA11AI.5181**

Amount of Each Receipt this Period  
250.00

**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 10 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jean M Belt**

Mailing Address 121 Renegar Way #209

City Saint Simons Island State GA Zip Code 31522

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

Name of Employer Retired Occupation Retired

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 / 25 / 2014

**Transaction ID : SA11AI.5448**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 20 Timber Ridge Drive

City Chagrin State OH Zip Code 44022

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

Name of Employer Bridge Industries, LLC Occupation Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 11 / 2014

**Transaction ID : SA11AI.5141**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P O Box 30172

City Sea Island State GA Zip Code 31561

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

Name of Employer Retired 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  
 03 / 14 / 2014

**Transaction ID : SA11AI.5353**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

**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 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Larry D Bouts**

Mailing Address 47 James Perry Lane

City State Zip Code  
St. Simons Island GA 31522

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

Name of Employer Occupation  
Self Employed Bouts Ventures

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 : SA11AI.5622**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 3201 South Cherokee Lane

City State Zip Code  
Woodstock GA 30188

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

Name of Employer Occupation  
Retired 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 / 03 / 2014

**Transaction ID : SA11AI.5258**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address P O Box 30226

City State Zip Code  
Sea Island GA 31561

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

Name of Employer Occupation  
Retired 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  
 02 / 28 / 2014

**Transaction ID : SA11AI.5231**

Amount of Each Receipt this Period  
 250.00

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

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

2250.00

**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 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mitchell V Brock**

Mailing Address 424 Mimosa Drive

City State Zip Code  
Saint Simons Island GA 31522

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

Name of Employer Occupation  
Southeastern OB GYN 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  
 03 / 24 / 2014

**Transaction ID : SA11AI.5416**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**C.V. Brookins Jr.**

Mailing Address 559 Panther Branch Road

City State Zip Code  
Sandersville GA 31082

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

Name of Employer Occupation  
CVB Industrial Contractor

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 / 13 / 2014

**Transaction ID : SA11AI.5337**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 320 Argonne Drive

City State Zip Code  
Atlanta GA 30305

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

Name of Employer Occupation  
Self Employed Private Equity Investor

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 : SA11AI.5664**

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 13 OF 148
	<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)  
**John McCallum for Congress**

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

Mailing Address 4309 16th Street

City State Zip Code  
St. Simons Island GA 31522

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

Name of Employer Occupation  
Retired 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  
03 / 24 / 2014

**Transaction ID : SA11AI.5421**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 110 Meadow Brook

City State Zip Code  
St. Simons Island GA 31522

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

Name of Employer Occupation  
Homemaker Homemaker

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 : SA11AI.5498**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address P O Box 69

City State Zip Code  
Warthen GA 31094

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

Name of Employer Occupation  
Subway Owner

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 / 13 / 2014

**Transaction ID : SA11AI.5347**

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 14 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Timothy Carroll**

Mailing Address 155 Saint Andrews

City State Zip Code  
St. Simons Island GA 31522

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

Name of Employer Occupation  
Higher Education Information Technology Director

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 / 31 / 2014

**Transaction ID : SA11AI.5673**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1709 Woodcliff Way

City State Zip Code  
Atlanta GA 30329

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

Name of Employer Occupation  
Parker, Hudson, Rainer, & Dobb Attorney

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 : SA11AI.5511**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 227 Medinah

City State Zip Code  
St. Simons Island GA 31522

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

Name of Employer Occupation  
Dermatology Associates Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 10 / 2014

**Transaction ID : SA11AI.5137**

Amount of Each Receipt this Period  
250.00

**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 15 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sandra Channell**

Mailing Address P O Box 30703

City State Zip Code  
Sea Island GA 31561

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

Name of Employer Occupation  
Homemaker Homemaker

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  
01 / 21 / 2014

**Transaction ID : SA11AI.5155**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 10 Commodore Court

City State Zip Code  
Savannah GA 31410

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

Name of Employer Occupation  
Tidewater Wealth Advisors LLC Investments

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  
02 / 04 / 2014

**Transaction ID : SA11AI.5168**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 414 Brentwood Drive

City State Zip Code  
Atlanta GA 30305

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

Name of Employer Occupation  
Self Employed Investments

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 / 06 / 2014

**Transaction ID : SA11AI.5276**

Amount of Each Receipt this Period  
250.00

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

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

750.00

**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 16 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gary M Coleman**

Mailing Address 1201 Coral Road

City State Zip Code  
Waycross GA 31501

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

Name of Employer Occupation  
Retired 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  
 03 / 24 / 2014

**Transaction ID : SA11AI.5432**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 3640 Stratford Avenue

City State Zip Code  
Dallas TX 75205

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

Name of Employer Occupation  
Newstone Capital Managing Director

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 / 27 / 2014

**Transaction ID : SA11AI.5505**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2 Lenn Place

City State Zip Code  
Little Rock AR 72202

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

Name of Employer Occupation  
Stehens Group Private Equity

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 / 28 / 2014

**Transaction ID : SA11AI.5162**

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 17 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Covington**

Mailing Address 2486 Brookhaven Place

City Atlanta State GA Zip Code 30319

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

Name of Employer Retired 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  
 03 / 31 / 2014

**Transaction ID : SA11AI.5592**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**John T Cox III**

Mailing Address 3432 Southwestern Blvd

City Dallas State TX Zip Code 75225

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

Name of Employer Lynn Tillotson Pinker & Cox Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11AI.5536**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 15 McIntosh Road

City Hilton Head Island State SC Zip Code 29926

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

Name of Employer Public Finance Solutions Occupation President

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 / 26 / 2014

**Transaction ID : SA11AI.5481**

Amount of Each Receipt this Period  
250.00

**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 18 OF 148
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pamela A Davis</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014	
Mailing Address 473 West 31st Street		<b>Transaction ID : SA11AI.5430</b>	
City State Zip Code Sea Island GA 31561	Amount of Each Receipt this Period _____ 1000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Homemaker Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Thomas Davis</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2014	
Mailing Address 2300 North Lincoln Park West 1120		<b>Transaction ID : SA11AI.5461</b>	
City State Zip Code Chicago IL 60614	Amount of Each Receipt this Period _____ 1000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation BBH Banker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Clinton M Day</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 06 / 2014	
Mailing Address 136 Butler Lake Drive		<b>Transaction ID : SA11AI.5286</b>	
City State Zip Code Saint Simons Island GA 31522	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Day Retail LLC Chairman		
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).....	_____ 2250.00
<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 19 OF 148
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Clinton M Day</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2014	
Mailing Address 136 Butler Lake Drive		<b>Transaction ID : SA11AI.5450</b>	
City Saint Simons Island	State GA	Zip Code 31522	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Day Retail LLC	Occupation Chairman		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) <b>B. Mark C De St. Aubin</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014	
Mailing Address 3086 Rhodenhaven Drive NW		<b>Transaction ID : SA11AI.5519</b>	
City Atlanta	State GA	Zip Code 30327	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer Smith Gambrell & Russell LLP	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Henry R Dickerson</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014	
Mailing Address 416 Old Newnan Road		<b>Transaction ID : SA11AI.5439</b>	
City Carrollton	State GA	Zip Code 30117	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Brand Bank	Occupation Executive Vice President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	950.00
<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 20 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jean R Dickey**

Mailing Address 181 Walden Road

City Sandersville State GA Zip Code 31082

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

Name of Employer Wen-Rob, Inc. Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 12 / 2014

**Transaction ID : SA11AI.5327**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 181 Walden Road

City Sandersville State GA Zip Code 31082

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

Name of Employer Wen-Rob, Inc. Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5609**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 377 Meadowbrook Drive

City Atlanta State GA Zip Code 30342

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

Name of Employer Newell Rubbermaid Occupation Medical Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 04 / 2014

**Transaction ID : SA11AI.5125**

Amount of Each Receipt this Period  
 250.00

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

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

1250.00

**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 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Laney Dickey**

Mailing Address 377 Meadowbrook Drive

City Atlanta State GA Zip Code 30342

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

Name of Employer Newell Rubbermaid Occupation Medical Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

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

**Transaction ID : SA11AI.5359**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address P O Box 30446

City Sea Island State GA Zip Code 31561

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

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

**Transaction ID : SA11AI.5191**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 419 Mimosa Drive

City St. Simons Island State GA Zip Code 31522

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

Name of Employer Self Employed Occupation Dermatologist

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 : SA11AI.5236**

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 22 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Louise Dodsworth**

Mailing Address 27 Herons Nest Road

City Savannah State GA Zip Code 31410

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 05 / 2014

**Transaction ID : SA11AI.5174**

Amount of Each Receipt this Period  
 300.00

Amount of Each Receipt this Period  
 400.00

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

Mailing Address 27 Herons Nest Road

City Savannah State GA Zip Code 31410

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

Name of Employer Adsworth Media Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 23 / 2014

**Transaction ID : SA11AI.5161**

Amount of Each Receipt this Period  
 5.00

Amount of Each Receipt this Period  
 435.00

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

Mailing Address 700 New Hampshire Avenue NW

City Washington State DC Zip Code 20037

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

Name of Employer Alston & Bird Occupation Special Counsel

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 21 / 2014

**Transaction ID : SA11AI.5151**

Amount of Each Receipt this Period  
 500.00

Amount of Each Receipt this Period  
 500.00

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

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

805.00

**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 148
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kevin Dunn</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 11 / 2014	
Mailing Address 204-B Marina Drive		<b>Transaction ID : SA11AI.5183</b>	
City St. Simons Island	State GA	Zip Code 31522	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer River Partners	Occupation VP Operations		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>B. Erica L Durst</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2014	
Mailing Address 125 Jefferson Ave #118		<b>Transaction ID : SA11AI.5550</b>	
City Miami Beach	State FL	Zip Code 33139	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00 Primary Runoff	
Name of Employer ZRD Energy	Occupation Marketing		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>C. Erica L Durst</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2014	
Mailing Address 125 Jefferson Ave #118		<b>Transaction ID : SA11AI.5551</b>	
City Miami Beach	State FL	Zip Code 33139	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer ZRD Energy	Occupation Marketing		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5450.00
<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 24 OF 148	
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Louis Nevon Dyer Jr.**

Mailing Address 110 Julienton Island Drive

City State Zip Code  
Brunswick GA 31520

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

Name of Employer Occupation  
Golden Isles Cruise Line Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.5626**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 5280 New London Trace

City State Zip Code  
Atlanta GA 30327

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

Name of Employer Occupation  
Retired 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 / 21 / 2014

**Transaction ID : SA11AI.5394**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 104 Peninsula Drive

City State Zip Code  
Saint Simons Island GA 31522

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

Name of Employer Occupation  
John McCallum for Congress Political Director

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 / 05 / 2014

**Transaction ID : SA11AI.5261**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

**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 25 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lamar H Ellis, Jr.**

Mailing Address P O Box 30956

City State Zip Code  
Sea Island GA 31561

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

Name of Employer Occupation  
Retired 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  
 02 / 20 / 2014

**Transaction ID : SA11AI.5197**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Dr. W. Page Faulk**

Mailing Address 125 Hampton River Club Marina Dr

City State Zip Code  
St. Simons Island GA 31522

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

Name of Employer Occupation  
Retired 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  
 03 / 24 / 2014

**Transaction ID : SA11AI.5428**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 215 Riverland Court

City State Zip Code  
Atlanta GA 30350

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

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

**Transaction ID : SA11AI.5619**

Amount of Each Receipt this Period  
400.00

**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 26 OF 148
	<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)  
**John McCallum for Congress**

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

Mailing Address 214 Riverland Court

City Atlanta State GA Zip Code 30350

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

Name of Employer Jones Lang LeSalle Occupation Senior Managing Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5617**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 1429 Adger Road

City Columbia State SC Zip Code 29205

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

Name of Employer Bank of America Merrill Lynch Occupation Financial Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5647**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 240 West Adams Street

City Tennille State GA Zip Code 31089

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5255**

Amount of Each Receipt this Period  
 500.00

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

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

3350.00

**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 148	
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Anne M Frazier**

Mailing Address 49 Maxwell Avenue

City State Zip Code  
St. Simons Island GA 31522

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

Name of Employer Occupation  
St. Simons United Methodist Administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11AI.5149**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2827 Ramsgate NW

City State Zip Code  
Atlanta GA 30305

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

Name of Employer Occupation  
Best Efforts Best Efforts

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 / 31 / 2014

**Transaction ID : SA11AI.5607**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 600 Congress Ave, Suite 200

City State Zip Code  
Austin TX 78701

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

Name of Employer Occupation  
Self Employed Investor

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 / 31 / 2014

**Transaction ID : SA11AI.5639**

Amount of Each Receipt this Period  
250.00

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

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

750.00

**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 148
	<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)  
**John McCallum for Congress**

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

Mailing Address 2634 Hyde Manor Drive

City Atlanta State GA Zip Code 30327

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

Name of Employer Alliant Occupation Executive Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5513**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 108 Thousand Oaks Drive

City Pittsburgh State PA Zip Code 15241

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5437**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address P O Box 30478

City Sea Island State GA Zip Code 31561

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

Name of Employer Retired Occupation Law

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : SA11AI.5442**

Amount of Each Receipt this Period  
 250.00

**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 29 OF 148
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. W Hensell Harris</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 300 Galleria Parkway Suite 1000		<b>Transaction ID : SA11AI.5579</b>
City Atlanta State GA Zip Code 30339	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Wasson Sours & Harris	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. David Hicks</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 02 / 2014
Mailing Address 800 Hamilton Landing		<b>Transaction ID : SA11AI.5106</b>
City St. Simons Island State GA Zip Code 31522	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Mallard Management Services	Occupation Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Mary Jo Hightower</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 2090 Giles Hightower Road		<b>Transaction ID : SA11AI.5581</b>
City Blakely State GA Zip Code 39823	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> 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 30 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Judson Hill**

Mailing Address 3102 Raines Court

City Marietta State GA Zip Code 30062

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

Name of Employer Harwood Advisors Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 02 / 2014

**Transaction ID : SA11AI.5102**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 5335 Bordley Drive

City Houston State TX Zip Code 77056

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

Name of Employer Bank of America Occupation Financial Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5545**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1786 Rampart Drive

City Alexandria State VA Zip Code 22308

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

Name of Employer CH 2 M Hill Occupation Gov't Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5379**

Amount of Each Receipt this Period  
 250.00

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

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

1250.00

**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 148
	<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)  
**John McCallum for Congress**

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

Mailing Address 220 Bradley Point Road

City Savannah State GA Zip Code 31410

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

Name of Employer Ivy Funding Occupation Finance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 02 / 2014

**Transaction ID : SA11AI.5110**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 220 Bradley Point Road

City Savannah State GA Zip Code 31410

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5684**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 1312 Comfort Road

City Augusta State GA Zip Code 30909

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5548**

Amount of Each Receipt this Period  
 500.00

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

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

4600.00

**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 148
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. John R Huss</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1930 Golf Club Way		<b>Transaction ID : SA11AI.5604</b>
City Braselton	State GA	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00
Name of Employer Best Efforts	Occupation Best Efforts	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Tommy Jackson</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 10571 Serenbe Lane		<b>Transaction ID : SA11AI.5388</b>
City Palmetto	State GA	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00
Name of Employer New South Construction	Occupation CPA	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. Jon Jenrette</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 205 Worth Avenue Suite 201		<b>Transaction ID : SA11AI.5099</b>
City Palm Beach	State FL	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Real Estate Investor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	750.00

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

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

FOR LINE NUMBER: PAGE 33 OF 148  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Scott N Ledbetter**

Mailing Address P O Box 31147

City State Zip Code  
Sea Island GA 31561

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

Name of Employer Occupation  
Self Employed Business Management

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5649**

Amount of Each Receipt this Period  
 100.00

Amount of Each Receipt this Period  
 1100.00

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

Mailing Address 39 West Montcrest Drive

City State Zip Code  
Birmingham AL 35213

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

Name of Employer Occupation  
MRP Developer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5576**

Amount of Each Receipt this Period  
 250.00

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 107 Seminole

City State Zip Code  
St. Simons Island GA 31522

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

Name of Employer Occupation  
One Love Organics, Inc. Management

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5588**

Amount of Each Receipt this Period  
 250.00

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 34 OF 148
	<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	

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)  
**John McCallum for Congress**

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

Mailing Address 770 Arden Close

City Atlanta State GA Zip Code 30327

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

Name of Employer Safe Harbor Consulting Occupation Consulting

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 03 / 2014

**Transaction ID : SA11AI.5170**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 174 Estoria Street SE

City Atlanta State GA Zip Code 30316

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

Name of Employer Georgia Oak Partners Occupation Managing Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5681**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Stewart M Long Jr.**

Mailing Address 105 Enclave Lane

City St. Simons Island State GA Zip Code 31522

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

Name of Employer Stewart M. Long & Assoc. LLC Occupation Financial Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5412**

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 35 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nickolas J Lorentzatos**

Mailing Address 543 Westminster Drive

City	State	Zip Code
Houston	TX	77024

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

Name of Employer	Occupation
Oasis Petroleum	Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5251**

Amount of Each Receipt this Period

500.00

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

Mailing Address 955 Stovall Blvd NE

City	State	Zip Code
Atlanta	GA	30319

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

Name of Employer	Occupation
Amendia, Inc.	Executive

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 : SA11AI.5520**

Amount of Each Receipt this Period

2500.00

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

Mailing Address 301 Sea Island Road Suite 6

City	State	Zip Code
Saint Simons Island	GA	31522

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

Name of Employer	Occupation
Self Employed	Real Estate Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5206**

Amount of Each Receipt this Period

500.00

**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 36 OF 148
	<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)  
**John McCallum for Congress**

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

Mailing Address 411 Brewster Lane

City: Saint Simons Island State: GA Zip Code: 31522

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

Name of Employer: Pain Assoc. of South Georgia Occupation: Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 750.00

Date of Receipt: 02 / 05 / 2014

**Transaction ID : SA11AI.5178**

Amount of Each Receipt this Period: 250.00

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

Mailing Address 411 Brewster Lane

City: Saint Simons Island State: GA Zip Code: 31522

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

Name of Employer: Pain Assoc. of South Georgia Occupation: Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 03 / 05 / 2014

**Transaction ID : SA11AI.5268**

Amount of Each Receipt this Period: 250.00

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

Mailing Address 20 Mabry Landing

City: St. Simons Island State: GA Zip Code: 31522

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

Name of Employer: Lowe's Occupation: Department Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 03 / 05 / 2014

**Transaction ID : SA11AI.5262**

Amount of Each Receipt this Period: 1000.00

**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 37 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ami McBay**

Mailing Address 115 Moonview Place

City Fayetteville State GA Zip Code 30215

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

Name of Employer Rogers Electric Occupation VP of Finance

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 : SA11AI.5595**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 115 Moonview Place

City Fayetteville State GA Zip Code 30215

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

Name of Employer Rogers Electric Occupation VP of Finance

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5597**

Amount of Each Receipt this Period  
 2600.00

Primary Runoff

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

Mailing Address 115 Moonview Place

City Fayetteville State GA Zip Code 30215

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

Name of Employer Rogers Electric Occupation VP of Finance

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 : SA11AI.5598**

Amount of Each Receipt this Period  
 2600.00

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

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

7800.00

**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 148
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Scotty McCoy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 13 / 2014
Mailing Address 2913 Hwy 15 North		<b>Transaction ID : SA11AI.5343</b>
City Sandersville	State GA Zip Code 31082	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Farmer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Maria M McCraney</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2014
Mailing Address 11952 S Edgewater Drive		<b>Transaction ID : SA11AI.5291</b>
City West Palm	State FL Zip Code 33410	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer McCraney Property Company	Occupation Vice President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>C. Mike McGovern</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 602 Tremont Street #2		<b>Transaction ID : SA11AI.5652</b>
City Boston	State MA Zip Code 02118	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Wincove Capital	Occupation Investments	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.00
<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 39 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nancy McGuirk**

Mailing Address 200 West Arden Road

City Atlanta State GA Zip Code 30327

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

Name of Employer Self Employed Occupation New Life Publishing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5463**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 148 East Commons Drive

City St. Simons Island State GA Zip Code 31522

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

Name of Employer Self Employed Occupation Face to Face Designs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 02 / 2014

**Transaction ID : SA11AI.5097**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**John Elam McKinley III**

Mailing Address 3245 Rilman Lake Court NW

City Atlanta State GA Zip Code 30327

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

Name of Employer Brand Bank Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5621**

Amount of Each Receipt this Period  
 1500.00

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

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

2750.00

**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 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nimrod McNair**

Mailing Address 9245 Creekside Trail

City State Zip Code  
Stone Mountain GA 30087

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

Name of Employer Occupation  
Self Employed Business Consultant

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 / 03 / 2014

**Transaction ID : SA11AI.5250**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 252 St. James Avenue

City State Zip Code  
St. Simons Island GA 31522

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

Name of Employer Occupation  
Southeast Georgia Health Sys 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 / 12 / 2014

**Transaction ID : SA11AI.5185**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4243 E Brookhaven Drive

City State Zip Code  
Atlanta GA 30319

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

Name of Employer Occupation  
McDonald's Restaurants Crew Member

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 / 31 / 2014

**Transaction ID : SA11AI.5602**

Amount of Each Receipt this Period  
250.00

**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 41 OF 148	
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Elizabeth H Muller**

Mailing Address 8 Oyster Reef Road

City Savannah State GA Zip Code 31411

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5282**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 8 Oyster Reef Road

City Savannah State GA Zip Code 31411

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

Name of Employer Self Employed Occupation Investment Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5280**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 1825 Pemberton Place

City Marietta State GA Zip Code 30062

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

Name of Employer Self Employed Occupation Financial Consultant

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 : SA11AI.5406**

Amount of Each Receipt this Period  
 250.00

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

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

750.00

**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 148
	<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)  
**John McCallum for Congress**

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

Mailing Address 1180 West Peachtree St NW  
Suite 2450

City Atlanta State GA Zip Code 30309

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

Name of Employer Occupation  
Norris Legal, LLC Attorney

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 : SA11AI.5323**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert J O'Brien**

Mailing Address P O Box 30477

City Sea Island State GA Zip Code 31561

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

Name of Employer Occupation  
Retired 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  
03 / 22 / 2014

**Transaction ID : SA11AI.5408**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**David O'Quinn**

Mailing Address 405 Mimosa Drive

City St. Simons Island State GA Zip Code 31522

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

Name of Employer Occupation  
Corinthian Trading Inc. President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 08 / 2014

**Transaction ID : SA11AI.5129**

Amount of Each Receipt this Period  
250.00

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

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

1250.00

**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 43 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Odachowski**

Mailing Address 715 Falls Landing Court

City State Zip Code  
Alpharetta GA 30022

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

Name of Employer Occupation  
Taylor, Odachowski, Schmidt Attorney

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 : SA11AI.5385**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Eston Wycliff Orr Jr.**

Mailing Address 3346 Pinestream Road NW

City State Zip Code  
Atlanta GA 30327

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

Name of Employer Occupation  
JAM Capital Partners Investment Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

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

**Transaction ID : SA11AI.5260**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Eston Wycliff Orr Jr.**

Mailing Address 3346 Pinestream Road NW

City State Zip Code  
Atlanta GA 30327

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

Name of Employer Occupation  
JAM Capital Partners Investment Advisor

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 : SA11AI.5672**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

**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 44 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jonathan W Osgood**

Mailing Address 322 Dunbarton Drive

City State Zip Code  
St. Simons Island GA 31522

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

Name of Employer Occupation  
Cutlass Capital, LLC Venture Capital

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 / 31 / 2014

**Transaction ID : SA11AI.5586**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1766 Garraux Place NW

City State Zip Code  
Atlanta GA 30327

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
4850.00

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

**Transaction ID : SA11AI.5403**

Amount of Each Receipt this Period  
2000.00  
Primary Runoff

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

Mailing Address 2020 Dixon Lane

City State Zip Code  
St. Simons Island GA 31522

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

Name of Employer Occupation  
Self Employed J H Parker Co.

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 : SA11AI.5333**

Amount of Each Receipt this Period  
1000.00

**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: (check only one)	PAGE 45 OF 148
	<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)  
**John McCallum for Congress**

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

Mailing Address #5 Sylvan Island Road

City Savannah State GA Zip Code 31404

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

Name of Employer Unemployed Occupation Unemployed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5364**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Frank K Peeples Sr.**

Mailing Address #5 Sylvan Island Road

City Savannah State GA Zip Code 31404

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

Name of Employer Peeples Industries Inc. Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5362**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address P O Box 10502

City Savannah State GA Zip Code 31412

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

Name of Employer Peeples Industries Inc. Occupation Maritime Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : SA11AI.5189**

Amount of Each Receipt this Period  
 250.00

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

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

750.00

**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 46 OF 148
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Frank Peeples, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2014	
Mailing Address P O Box 10502		<b>Transaction ID : SA11AI.5378</b>	
City Savannah	State GA	Zip Code 31412	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Peeples Industries Inc.	Occupation Maritime Executive		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Carl Peoples</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 1109 Mendell Circle NE		<b>Transaction ID : SA11AI.5578</b>	
City Atlanta	State GA	Zip Code 30319	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Goldman Sachs	Occupation Investment Management		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 750.00		

Full Name (Last, First, Middle Initial) <b>C. Wondal Perry</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 20 Tall Pine Circle		<b>Transaction ID : SA11AI.5682</b>	
City Augusta	State GA	Zip Code 30909	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Homemaker	Occupation Homemaker		
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).....	_____ 1000.00
<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 47 OF 148
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>Pete Petit</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 06 / 2014
Mailing Address 1650 Cox Road		<b>Transaction ID : SA11AI.5289</b>
City Roswell	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Mimedx Group Inc.	Occupation CEO	
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>Ray Pippin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 26 / 2014
Mailing Address P O Box One		<b>Transaction ID : SA11AI.5221</b>
City Macon	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer McNair, McLemore, Middlebrooks	Occupation CPA	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Leigh Victoria Pittard</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 3475 Lenox Rd NE Ste 300		<b>Transaction ID : SA11AI.5631</b>
City Atlanta	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1600.00
Name of Employer Homemaker	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	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4700.00
<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 48 OF 148
	<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	

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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Leigh Victoria Pittard**

Mailing Address 3475 Lenox Rd NE Ste 300

City Atlanta State GA Zip Code 30326

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
 \_\_\_\_\_ 5200.00

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

**Transaction ID : SA11AI.5632**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2600.00

Primary Runoff

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

Mailing Address 3475 Lenox Rd NE Ste 300

City Atlanta State GA Zip Code 30326

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

Name of Employer Homemaker Occupation Homemaker

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 : SA11AI.5633**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2600.00

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

Mailing Address 3475 Lenox Rd NE Suite 300

City Atlanta State GA Zip Code 30326

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

Name of Employer PatrickPittard Advisors Occupation CEO & President

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 : SA11AI.5634**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2600.00

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

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

\_\_\_\_\_ 7800.00

\_\_\_\_\_

**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 49 OF 148
	<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	

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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dana H Pope**

Mailing Address 398 Mimosa Street

City St. Simons Island State GA Zip Code 31522

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

Name of Employer St. Simons Land Trust Occupation Deputy Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 03 / 2014

**Transaction ID : SA11AI.5120**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 210 Hampton Point Drive

City St. Simons Island State GA Zip Code 31522

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

Name of Employer The Dentist at Redfern Occupation Office Manager

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 / 10 / 2014

**Transaction ID : SA11AI.5316**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 731 Manatee Cove

City Vero Beach State FL Zip Code 32963

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

Name of Employer Sands Capital Management LLC Occupation Investments

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11AI.5500**

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 50 OF 148
	<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)  
**John McCallum for Congress**

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

Mailing Address 640 Atlanta Country Club Drive

City Marietta State GA Zip Code 30067

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

Name of Employer Amendia, Inc. Occupation CTO

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 : SA11AI.5556**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address P O Box 31165

City Sea Island State GA Zip Code 31561

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

Name of Employer Retired 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 / 07 / 2014

**Transaction ID : SA11AI.5297**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1425 Wesley Walk NW

City Atlanta State GA Zip Code 30327

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

Name of Employer Retired 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  
 02 / 25 / 2014

**Transaction ID : SA11AI.5215**

Amount of Each Receipt this Period  
 1000.00

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

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

2250.00

**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 51 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gary G Rehe**

Mailing Address 6075 Farmwood Way SE

City Mableton State GA Zip Code 30126

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

Name of Employer McCullough & Associates Occupation Sales Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5507**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 12870 Heydon Hall

City Roswell State GA Zip Code 30075

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

Name of Employer Rogers Electric Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 13 / 2014

**Transaction ID : SA11AI.5143**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 12870 Heydon Hall

City Roswell State GA Zip Code 30075

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 13 / 2014

**Transaction ID : SA11AI.5145**

Amount of Each Receipt this Period  
 2600.00

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

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

5450.00

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

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

FOR LINE NUMBER: PAGE 52 OF 148  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**John McCallum for Congress**

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

Mailing Address 311 Carnoustie

City State Zip Code  
Saint Simons Island GA 31522

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

Name of Employer Occupation  
Consultants in Pain Medicine Physician

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
750.00

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

**Transaction ID : SA11AI.5489**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Thomas F Rybert III**

Mailing Address 1230 Bellaire Drive

City State Zip Code  
Atlanta GA 30319

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

Name of Employer Occupation  
Self Employed Real Estate 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 Y Y  
 03 / 21 / 2014

**Transaction ID : SA11AI.5404**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ronald W San Martin**

Mailing Address 1093 A1A Beach Blvd PMB 439

City State Zip Code  
Saint Augustine FL 32080

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

Name of Employer Occupation  
Self Employed Executive

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 / 31 / 2014

**Transaction ID : SA11AI.5573**

Amount of Each Receipt this Period  
250.00

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

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

1250.00

**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 53 OF 148
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Brandon L Sawalich</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 6425 Beach Road		<b>Transaction ID : SA11AI.5528</b>	
City Eden Prairie	State MN	Zip Code 55344	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Starkey Hearing Technologies	Occupation Senior VP		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Steven M Sawalich</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2014	
Mailing Address 1501 9th Street		<b>Transaction ID : SA11AI.5564</b>	
City Manhattan Beach	State CA	Zip Code 90266	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Starkey Hearing Foundation	Occupation Senior Executive Director		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 750.00		

Full Name (Last, First, Middle Initial) <b>C. F Mackey Schneider</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 3225 Jett Ferry Court		<b>Transaction ID : SA11AI.5530</b>	
City Atalnta	State GA	Zip Code 30350	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Northwestern Mutual	Occupation Financial Advisor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1750.00
<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 54 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lindsey Rogers Schultz**

Mailing Address 4518 Club Circle NE

City Atlanta State GA Zip Code 30319

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

Name of Employer Rogers Electric Occupation VP Human Resources

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 22 / 2014

**Transaction ID : SA11AI.5157**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 4518 Club Circle NE

City Atlanta State GA Zip Code 30319

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

Name of Employer Rogers Electric Occupation VP Human Resources

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 22 / 2014

**Transaction ID : SA11AI.5159**

Amount of Each Receipt this Period  
 2600.00

Primary Runoff

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

Mailing Address 4518 Club Circle NE

City Atlanta State GA Zip Code 30319

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

Name of Employer Rogers Electric Occupation VP Human Resources

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 22 / 2014

**Transaction ID : SA11AI.5160**

Amount of Each Receipt this Period  
 2600.00

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

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

7800.00

**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 55 OF 148
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joy Ellen Scott</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 02 / 2014	
Mailing Address 5080 Due West Road		<b>Transaction ID : SA11AI.5108</b>	
City Powder Springs	State GA	Zip Code 30127	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Joy Ellen Scott</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 5080 Due West Road		<b>Transaction ID : SA11AI.5616</b>	
City Powder Springs	State GA	Zip Code 30127	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) <b>C. Earl L Shell Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014	
Mailing Address 50 Cates Ridge		<b>Transaction ID : SA11AI.5440</b>	
City Atlanta	State GA	Zip Code 30327	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

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

FOR LINE NUMBER: PAGE 56 OF 148  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cliff Sheppard**

Mailing Address P O Drawer 797

City Sandersville State GA Zip Code 31082

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

Name of Employer Howard Sheppard Inc. Occupation Transportation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5228**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address P O Drawer 797

City Sandersville State GA Zip Code 31082

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

Name of Employer Howard Sheppard Inc. Occupation Transportation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5309**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 135 Pine Valley

City St. Simons Island State GA Zip Code 31522

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5193**

Amount of Each Receipt this Period  
 250.00

**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 57 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ben T Slade III**

Mailing Address 109 Hawkins Island Circle

City State Zip Code  
St. Simons Island GA 31522

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

Name of Employer Occupation  
St. Simons Land Trust Executive Director

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 / 14 / 2014

**Transaction ID : SA11AI.5349**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 4124 Whitewater Creek Rd NW

City State Zip Code  
Atlanta GA 30327

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
5200.00

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

**Transaction ID : SA11AI.5613**

Amount of Each Receipt this Period  
2600.00  
Primary Runoff

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

Mailing Address 4124 Whitewater Creek Rd NW

City State Zip Code  
Atlanta GA 30327

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

Name of Employer Occupation  
Homemaker Homemaker

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 : SA11AI.5615**

Amount of Each Receipt this Period  
2600.00

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

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

5450.00

**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 58 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Clarence E Smith III**

Mailing Address 3076 Maple Drive

City Atlanta State GA Zip Code 30305

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

Name of Employer Smith Organization Occupation Insurance Agent

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5395**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Smith, Gambrell, & Rusell**

Mailing Address 1230 Peachtree St NE, Ste 100 Promenade II

City Atlanta State GA Zip Code 30309

FEC ID number of contributing federal political committee. **C** C00187112

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5629**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 4124 Whitewater Creek Rd NW

City Atlanta State GA Zip Code 30327

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

Name of Employer Amendia Inc. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5612**

Amount of Each Receipt this Period  
 2600.00  
 Primary Runoff

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

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

3850.00

**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 59 OF 148
	<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)  
**John McCallum for Congress**

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

Mailing Address 4124 Whitewater Creek Rd NW

City Atlanta State GA Zip Code 30327

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

Name of Employer Amendia Inc. Occupation CEO

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 : SA11AI.5614**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 810 Euclid Avenue

City Waycross State GA Zip Code 31501

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

Name of Employer Edward F Smith Law Offices Occupation Attorney

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 : SA11AI.5610**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Charles A Smithgall III**

Mailing Address 3108 Piedmont Rd NE Suite 202

City Atlanta State GA Zip Code 30305

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

Name of Employer SEI/Aaron's Inc. Occupation Furniture

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : SA11AI.5449**

Amount of Each Receipt this Period  
1000.00

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

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

4600.00

**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 60 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dan Speight**

Mailing Address 1855 Liberty Church Road

City Pinehurst State GA Zip Code 31070

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

Name of Employer State Bank & Trust Occupation Banker

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 / 27 / 2014

**Transaction ID : SA11AI.5503**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 295 West Adams Street

City Tennesse State GA Zip Code 31089

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

Name of Employer Retired 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  
 02 / 26 / 2014

**Transaction ID : SA11AI.5223**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 3439 Knollwood Dr NW

City Atlanta State GA Zip Code 30305

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

Name of Employer Retired 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  
 03 / 27 / 2014

**Transaction ID : SA11AI.5509**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

**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 61 OF 148
	<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)  
**John McCallum for Congress**

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

Mailing Address 30 Chatsworth Place NW

City Atlanta State GA Zip Code 30327

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

Name of Employer Strickland Brockington Lewis Occupation Lawyer

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 : SA11AI.5637**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 508 Palm Harbor Road

City St. Simons Island State GA Zip Code 31522

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

Name of Employer Self Employed Occupation Attorney

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 : SA11AI.5202**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 112 Westchester

City Saint Simons Island State GA Zip Code 31522

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

Name of Employer Strother Hardware 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 / 24 / 2014

**Transaction ID : SA11AI.5434**

Amount of Each Receipt this Period  
 250.00

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

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

800.00

**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 62 OF 148
	<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)  
**John McCallum for Congress**

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

Mailing Address 211 Pomeroy Avenue Apt. 1403

City Meriden State CT Zip Code 06450

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

Name of Employer The Eastern Company Occupation CFO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5565**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address P O Box 269

City Sandersville State GA Zip Code 31082

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

Name of Employer Sandersville Railroad Occupation Asst. Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5227**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ben J Tarbutton Jr.**

Mailing Address 625 Linton Road

City Sandersville State GA Zip Code 31082

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

Name of Employer Sandersville Railroad Occupation Transportation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5245**

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 63 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HM Tarbutton**

Mailing Address P O Box 269

City Sandersville State GA Zip Code 31082

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

Name of Employer Sandersville Railroad Occupation President

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 / 13 / 2014

**Transaction ID : SA11AI.5345**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

\_\_\_\_\_ 500.00

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

Mailing Address 155 Stillwater Drive

City Saint Simons Island State GA Zip Code 31522

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

Name of Employer St. Simons Island Dental Assoc Occupation Dentist

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 / 11 / 2014

**Transaction ID : SA11AI.5325**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

\_\_\_\_\_ 500.00

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

Mailing Address 425 Pierce Avenue #507

City Cape Canaveral State FL Zip Code 32920

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

Name of Employer Retired 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 / 31 / 2014

**Transaction ID : SA11AI.5571**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

\_\_\_\_\_ 250.00

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

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

\_\_\_\_\_ 1250.00

\_\_\_\_\_

**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 64 OF 148
	<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)  
**John McCallum for Congress**

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

Mailing Address 250 Sturges Hwy

City State Zip Code  
Westport CT 06880

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

Name of Employer Occupation  
Retired 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  
 03 / 14 / 2014

**Transaction ID : SA11AI.5355**

Amount of Each Receipt this Period  
500.00

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

Mailing Address P O Box 30055

City State Zip Code  
Sea Island GA 31561

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

Name of Employer Occupation  
Retired Retired

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 / 24 / 2014

**Transaction ID : SA11AI.5425**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jewell J Turner Jr.**

Mailing Address P O Box 186

City State Zip Code  
Warthen GA 31094

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

Name of Employer Occupation  
Retired 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  
 03 / 03 / 2014

**Transaction ID : SA11AI.5246**

Amount of Each Receipt this Period  
250.00

**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 65 OF 148
	<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)  
**John McCallum for Congress**

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

Mailing Address 2129 Bruce Drive

City State Zip Code  
St. Simons Island GA 31522

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

Name of Employer Occupation  
Alta Anesthesia Associates Anesthesiologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 21 / 2014

**Transaction ID : SA11AI.5153**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 145 Edge Water Drive

City State Zip Code  
Brunswick GA 31525

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

Name of Employer Occupation  
Rich Products Corporation Finance Manager

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 / 31 / 2014

**Transaction ID : SA11AI.5585**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 503 Forest Road

City State Zip Code  
Sea Island GA 31561

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

Name of Employer Occupation  
Retired 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  
 03 / 24 / 2014

**Transaction ID : SA11AI.5417**

Amount of Each Receipt this Period  
500.00

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

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

800.00

**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 66 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Shawn Welch**

Mailing Address 799 Drewry Street

City Atlanta State GA Zip Code 30306

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

Name of Employer Self Employed Occupation Venture Capital

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5329**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 107 Bay Berry Circle

City St. Simons Island State GA Zip Code 31522

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

Name of Employer The Brick Occupation Fitness Instructor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 03 / 2014

**Transaction ID : SA11AI.5123**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 905 Rose Cottage Road

City St. Simons Island State GA Zip Code 31522

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

Name of Employer John Wetzler, PC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11AI.5225**

Amount of Each Receipt this Period  
 250.00

**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 67 OF 148
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Michael S Wheeler</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 7501 Seminole Blvd		<b>Transaction ID : SA11AI.5599</b>	
City Seminole	State FL	Zip Code 33772	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Audibel Hearing Aid Centers	Occupation Owner		
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. Michael S Wheeler</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 7501 Seminole Blvd		<b>Transaction ID : SA11AI.5601</b>	
City Seminole	State FL	Zip Code 33772	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00 Primary Runoff	
Name of Employer Audibel Hearing Aid Centers	Occupation Owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) <b>C. James Bronson Whitley</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014	
Mailing Address 124 Timothy Park Lane		<b>Transaction ID : SA11AI.5501</b>	
City Athens	State GA	Zip Code 30606	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer Landmark Properties	Occupation Vice President & COO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<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 68 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William H Wiggins**

Mailing Address 304 North Harris Street

City Sandersville State GA Zip Code 31082

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5307**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**David S Wilkins, Jr.**

Mailing Address 158 E Commons Drive

City St. Simons Island State GA Zip Code 31522

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

Name of Employer Coastal Bank of Georgia Occupation Sr. Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5217**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 124 Blackland Road NW

City Atlanta State GA Zip Code 30342

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

Name of Employer Quikrete Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5360**

Amount of Each Receipt this Period  
 2600.00

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

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

3100.00

**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 69 OF 148
	<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)  
**John McCallum for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gayle A Winchester**

Mailing Address 124 Blackland Road NW

City Atlanta State GA Zip Code 30342

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

Name of Employer Quikrete Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5524**

Amount of Each Receipt this Period  
 2600.00

Primary Runoff

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

Mailing Address 124 Blackland Road NW

City Atlanta State GA Zip Code 30342

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

Name of Employer Quikrete 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 / 28 / 2014

**Transaction ID : SA11AI.5525**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 8220 Crestwood Heights Drive  
Unit 1415

City McLean State VA Zip Code 22102

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

Name of Employer Capital One Financial Corp Occupation Strategy Director

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 : SA11AI.5670**

Amount of Each Receipt this Period  
 250.00

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

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

5450.00

**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 70 OF 148
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Miguel Zorrilla</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 812 Ivy Lane		<b>Transaction ID : SA11Al.5569</b>
City San Antonio	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Banque Morgan Stanley S.A.	Occupation Executive Director	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	163605.00

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

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

FOR LINE NUMBER: PAGE 71 OF 148  
(check only one)

<input type="checkbox"/> 11a 12	<input checked="" 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)  
**John McCallum for Congress**

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

Mailing Address P O Box 20097

City State Zip Code  
Saint Simons Island GA 31522

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

Name of Employer Occupation  
JAM Capital Partners Investment Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200000.00

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

**Transaction ID : SA13A.5092**

Amount of Each Receipt this Period  
100000.00

**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  
M M / D D / Y Y Y Y Y Y

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  
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).....

100000.00

100000.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA13A

Transaction ID : SA13A.5092

Personal Funds.

Form/Schedule:

Transaction ID:

**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 148	
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. 19th Hole Package Store</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 3600 Frederica Road Suite 17		Amount of Each Disbursement this Period 608.19
City St. Simons Island	State GA Zip Code 31522	
Purpose of Disbursement Food and/or beverages purchase for fundraiser	Category/Type 003	<b>Transaction ID : SB17.5047</b>
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. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address P O Box 53852		Amount of Each Disbursement this Period 500.00
City Phoenix	State AZ Zip Code 85072	
Purpose of Disbursement Credit card fees	Category/Type 001	<b>Transaction ID : SB17.5038</b>
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>C. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address P O Box 53852		Amount of Each Disbursement this Period 25.33
City Phoenix	State AZ Zip Code 85072	
Purpose of Disbursement Credit card fees	Category/Type 001	<b>Transaction ID : SB17.5039</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1133.52
<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 74 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kim Belt</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 625 May Joe Street		Amount of Each Disbursement this Period 1890.93
City Saint Simons Island	State GA	
Zip Code 31522		
Purpose of Disbursement Payroll		Category/ Type 001
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. Kim Belt</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 625 May Joe Street		Amount of Each Disbursement this Period 1453.50
City Saint Simons Island	State GA	
Zip Code 31522		
Purpose of Disbursement Payroll		Category/ Type 001
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>C. Kim Belt</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 625 May Joe Street		Amount of Each Disbursement this Period 1906.63
City Saint Simons Island	State GA	
Zip Code 31522		
Purpose of Disbursement Payroll		Category/ Type 001
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: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5251.06
<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 75 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jabari Bryant</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 2333 Pinetree Road		Amount of Each Disbursement this Period 1163.52
City Savannah	State GA Zip Code 31404	
Purpose of Disbursement Payroll	Category/Type 001	<b>Transaction ID : SB17.5005</b>
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. Celebrities</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 1014 Atlantic Avenue		Amount of Each Disbursement this Period 749.00
City Savannah	State GA Zip Code 31401	
Purpose of Disbursement Campaign materials purchase of campaign T-shirts	Category/Type 006	<b>Transaction ID : SB17.5074</b>
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>c. Charles J. Russo Seafood</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 201 East 40th Street at Abercorn		Amount of Each Disbursement this Period 1395.22
City Savannah	State GA Zip Code 31401	
Purpose of Disbursement Catering costs for fundraiser	Category/Type 003	<b>Transaction ID : SB17.4957</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3307.74
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4957

Skidaway Meet & Greet

Form/Schedule:

Transaction ID:

**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 77 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Charles J. Russo Seafood</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2014		
Mailing Address 201 East 40th Street at Abercorn			Amount of Each Disbursement this Period 1760.25		
City Savannah	State GA	Zip Code 31401	Transaction ID : SB17.5060		
Purpose of Disbursement Catering costs for fundraiser		003 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. Kathy Childers</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014		
Mailing Address 110 Sylvan Drive			Amount of Each Disbursement this Period 530.00		
City Sr. Simons Island	State GA	Zip Code 31522	Transaction ID : SB17.5049		
Purpose of Disbursement Catering costs for fundraiser		003 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>c. Kathy Childers</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014		
Mailing Address 110 Sylvan Drive			Amount of Each Disbursement this Period 15.00		
City Sr. Simons Island	State GA	Zip Code 31522	Transaction ID : SB17.5057		
Purpose of Disbursement Food and/or beverage		003 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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2305.25
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.5060

Catering for the Fish Fry for the Waycross Meet & Greet Event.

Form/Schedule: SB17

Transaction ID: SB17.5049

Catering cost for reimbursement.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.5057

Catering costs reimbursement.

Form/Schedule:

Transaction ID:

**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 80 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 6565 Nova Drive		Amount of Each Disbursement this Period 80.51
City Davie	State FL	
Zip Code 33317	Purpose of Disbursement Phone bill	001 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. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 6565 Nova Drive		Amount of Each Disbursement this Period 80.51
City Davie	State FL	
Zip Code 33317	Purpose of Disbursement Phone bill	001 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>c. Rachel Louise Dodsworth</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 27 Herons Nest Road		Amount of Each Disbursement this Period 197.21
City Savannah	State GA	
Zip Code 31410	Purpose of Disbursement Signs	006 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	358.23
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4844

Reimbursement for purchase of table sign and banner at Fedex for candidate.

Form/Schedule:

Transaction ID:

**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 82 OF 148	
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 3875 Airways, Module H3 Department 4634		Amount of Each Disbursement this Period 197.21
City Memphis	State TN Zip Code 38116	
Purpose of Disbursement Signs	Category/Type 006	Transaction ID : SB17.4844.0
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Rachel Louise Dodsworth</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 27 Herons Nest Road		Amount of Each Disbursement this Period 4503.06
City Savannah	State GA Zip Code 31410	
Purpose of Disbursement Payroll	Category/Type 001	Transaction ID : SB17.4861
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>c. Rachel Louise Dodsworth</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 27 Herons Nest Road		Amount of Each Disbursement this Period 723.58
City Savannah	State GA Zip Code 31410	
Purpose of Disbursement Mileage/mileage reimbursement	Category/Type 002	Transaction ID : SB17.4878
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5226.64
<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 83 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Rachel Louise Dodsworth</b>			Date of Disbursement MM / DD / YYYY 02 / 07 / 2014		
Mailing Address 27 Herons Nest Road			Amount of Each Disbursement this Period 28.52		
City Savannah	State GA	Zip Code 31410	Transaction ID : SB17.4912		
Purpose of Disbursement Reimbursement for dinner		Category/ Type 007			
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. Rachel Louise Dodsworth</b>			Date of Disbursement MM / DD / YYYY 02 / 10 / 2014		
Mailing Address 27 Herons Nest Road			Amount of Each Disbursement this Period 181.88		
City Savannah	State GA	Zip Code 31410	Transaction ID : SB17.4917		
Purpose of Disbursement Reimbursement for table sign		Category/ Type 006			
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>C. FedEx</b>			Date of Disbursement MM / DD / YYYY 02 / 08 / 2014		
Mailing Address 3875 Airways, Module H3 Department 4634			Amount of Each Disbursement this Period 181.88		
City Memphis	State TN	Zip Code 38116	Transaction ID : SB17.4917.0		
Purpose of Disbursement Signs - banner		Category/ Type 006	[MEMO ITEM]		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	210.40
<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 84 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Rachel Louise Dodsworth</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2014		
Mailing Address 27 Herons Nest Road			Amount of Each Disbursement this Period 1053.89		
City Savannah	State GA	Zip Code 31410	Transaction ID : SB17.4933		
Purpose of Disbursement Catering		003 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. Charles J. Russo Seafood</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014		
Mailing Address 201 East 40th Street at Abercorn			Amount of Each Disbursement this Period 755.20		
City Savannah	State GA	Zip Code 31401	Transaction ID : SB17.4933.0		
Purpose of Disbursement Catering		003 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>c. Publix</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014		
Mailing Address 4717 Hwy 80 E Ste B			Amount of Each Disbursement this Period 266.66		
City Savannah	State GA	Zip Code 31401	Transaction ID : SB17.4933.1		
Purpose of Disbursement Food and/or beverage		003 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1053.89
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4933

Long Point Meet & Greet

Form/Schedule:

Transaction ID:

**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 86 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Rachel Louise Dodsworth</b>			Date of Disbursement MM / DD / YYYY 02 / 27 / 2014	
Mailing Address 27 Herons Nest Road			Amount of Each Disbursement this Period 4503.06	
City Savannah	State GA	Zip Code 31410	Transaction ID : SB17.4979	
Purpose of Disbursement Payroll		Category/ Type 001		
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. Rachel Louise Dodsworth</b>			Date of Disbursement MM / DD / YYYY 02 / 28 / 2014	
Mailing Address 27 Herons Nest Road			Amount of Each Disbursement this Period 570.37	
City Savannah	State GA	Zip Code 31410	Transaction ID : SB17.4987	
Purpose of Disbursement Mileage/mileage reimbursement		Category/ Type 002		
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>c. Rachel Louise Dodsworth</b>			Date of Disbursement MM / DD / YYYY 03 / 13 / 2014	
Mailing Address 27 Herons Nest Road			Amount of Each Disbursement this Period 32.00	
City Savannah	State GA	Zip Code 31410	Transaction ID : SB17.5027	
Purpose of Disbursement Reimbursement for ticket cost for luncheon		Category/ Type 007		
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5105.43
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4987

Reimbursement for mileage from Savannah to St. Simons Island, Ga.

Form/Schedule:

Transaction ID:

**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 88 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Rachel Louise Dodsworth</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 27 Herons Nest Road		Amount of Each Disbursement this Period 98.94 <b>Transaction ID : SB17.5032</b>
City Savannah State GA Zip Code 31410	Purpose of Disbursement Reimbursement for phone bill 001 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. Rachel Louise Dodsworth</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 27 Herons Nest Road		Amount of Each Disbursement this Period 4503.06 <b>Transaction ID : SB17.5078</b>
City Savannah State GA Zip Code 31410	Purpose of Disbursement Payroll 001 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>c. Joseph Wells Ellenberg</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address 104 Peninsula Drive		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4822</b>
City Saint Simons Island State GA Zip Code 31522	Purpose of Disbursement Payroll 001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5102.00
<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 89 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph Wells Ellenberg</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014	
Mailing Address 104 Peninsula Drive			Amount of Each Disbursement this Period 1989.27	
City Saint Simons Island	State GA	Zip Code 31522	Transaction ID : SB17.4862	
Purpose of Disbursement Payroll		Category/ Type 001		
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. Joseph Wells Ellenberg</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014	
Mailing Address 104 Peninsula Drive			Amount of Each Disbursement this Period 97.66	
City Saint Simons Island	State GA	Zip Code 31522	Transaction ID : SB17.4885	
Purpose of Disbursement Mileage		Category/ Type 002		
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>c. Joseph Wells Ellenberg</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014	
Mailing Address 104 Peninsula Drive			Amount of Each Disbursement this Period 30.00	
City Saint Simons Island	State GA	Zip Code 31522	Transaction ID : SB17.4886	
Purpose of Disbursement Reimbursement for tickets for luncheon		Category/ Type 007		
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2116.93
<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 90 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph Wells Ellenberg</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 104 Peninsula Drive		Amount of Each Disbursement this Period 15.00 <b>Transaction ID : SB17.4887</b>
City Saint Simons Island	State GA	
Zip Code 31522	Purpose of Disbursement Reimbursement for membership fee	Category/ Type 007
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. Joseph Wells Ellenberg</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 104 Peninsula Drive		Amount of Each Disbursement this Period 2346.02 <b>Transaction ID : SB17.4981</b>
City Saint Simons Island	State GA	
Zip Code 31522	Purpose of Disbursement Payroll	Category/ Type 001
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>c. Joseph Wells Ellenberg</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 104 Peninsula Drive		Amount of Each Disbursement this Period 170.02 <b>Transaction ID : SB17.4988</b>
City Saint Simons Island	State GA	
Zip Code 31522	Purpose of Disbursement Mileage/mileage reimbursement	Category/ Type 002
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2531.04
<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 91 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph Wells Ellenberg</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 104 Peninsula Drive		Amount of Each Disbursement this Period 10.59 <b>Transaction ID : SB17.4989</b>
City Saint Simons Island	State GA	
Zip Code 31522	Purpose of Disbursement Reimbursement for fundraising supplies	Category/ Type 003
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. Joseph Wells Ellenberg</b>		Date of Disbursement MM / DD / YYYY 03 / 28 / 2014
Mailing Address 104 Peninsula Drive		Amount of Each Disbursement this Period 2346.02 <b>Transaction ID : SB17.5079</b>
City Saint Simons Island	State GA	
Zip Code 31522	Purpose of Disbursement Payroll	Category/ Type 001
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>c. Facebook</b>		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address 1601 S. California Avenue		Amount of Each Disbursement this Period 250.45 <b>Transaction ID : SB17.5043</b>
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Advertising	Category/ Type 004
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2607.06
<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 92 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 3875 Airways, Module H3 Department 4634		Amount of Each Disbursement this Period 87.88
City Memphis State TN Zip Code 38116	Category/Type 003	
Purpose of Disbursement Shipping/delivery service		Transaction ID : SB17.4823
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. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 3875 Airways, Module H3 Department 4634		Amount of Each Disbursement this Period 12.46
City Memphis State TN Zip Code 38116	Category/Type 003	
Purpose of Disbursement Shipping/delivery service		Transaction ID : SB17.4826
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>C. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 3875 Airways, Module H3 Department 4634		Amount of Each Disbursement this Period 138.00
City Memphis State TN Zip Code 38116	Category/Type 003	
Purpose of Disbursement Postage		Transaction ID : SB17.4847
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	238.34
<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 93 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>A. FedEx</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		21		2014
M M	/	D D	/	Y Y Y Y								
01		21		2014								
Mailing Address 3875 Airways, Module H3 Department 4634		Amount of Each Disbursement this Period <table border="1"><tr><td>25.41</td></tr></table>	25.41									
25.41												
City Memphis	State TN Zip Code 38116											
Purpose of Disbursement Shipping services	Category/Type 003	<b>Transaction ID : SB17.4849</b>										
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)		Date of Disbursement										
<b>B. FedEx</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		26		2014
M M	/	D D	/	Y Y Y Y								
02		26		2014								
Mailing Address 3875 Airways, Module H3 Department 4634		Amount of Each Disbursement this Period <table border="1"><tr><td>62.10</td></tr></table>	62.10									
62.10												
City Memphis	State TN Zip Code 38116											
Purpose of Disbursement Shipping services	Category/Type 003	<b>Transaction ID : SB17.4971</b>										
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)		Date of Disbursement										
<b>C. FedEx</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>07</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		07		2014
M M	/	D D	/	Y Y Y Y								
03		07		2014								
Mailing Address 3875 Airways, Module H3 Department 4634		Amount of Each Disbursement this Period <table border="1"><tr><td>13.44</td></tr></table>	13.44									
13.44												
City Memphis	State TN Zip Code 38116											
Purpose of Disbursement Shipping services	Category/Type 003	<b>Transaction ID : SB17.5008</b>										
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:												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"><tr><td>100.95</td></tr></table>	100.95
100.95		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"><tr><td></td></tr></table>	

**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 94 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 3875 Airways, Module H3 Department 4634		Amount of Each Disbursement this Period 39.59
City Memphis	State TN Zip Code 38116	
Purpose of Disbursement Shipping services	Category/Type 003	Transaction ID : SB17.5033
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. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 3875 Airways, Module H3 Department 4634		Amount of Each Disbursement this Period 77.49
City Memphis	State TN Zip Code 38116	
Purpose of Disbursement Shipping services	Category/Type 003	Transaction ID : SB17.5037
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>C. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 3875 Airways, Module H3 Department 4634		Amount of Each Disbursement this Period 74.44
City Memphis	State TN Zip Code 38116	
Purpose of Disbursement Shipping services	Category/Type 003	Transaction ID : SB17.5045
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	191.52
<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 95 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 3875 Airways, Module H3 Department 4634		Amount of Each Disbursement this Period 1257.15 <b>Transaction ID : SB17.5066</b>
City Memphis State TN Zip Code 38116	Purpose of Disbursement Shipping services Category/Type 003	
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. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 3875 Airways, Module H3 Department 4634		Amount of Each Disbursement this Period 37.50 <b>Transaction ID : SB17.5073</b>
City Memphis State TN Zip Code 38116	Purpose of Disbursement Shipping services Category/Type 003	
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>C. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 3875 Airways, Module H3 Department 4634		Amount of Each Disbursement this Period 1399.98 <b>Transaction ID : SB17.5076</b>
City Memphis State TN Zip Code 38116	Purpose of Disbursement Shipping services Category/Type 003	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2694.63
<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 96 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 3875 Airways, Module H3 Department 4634		Amount of Each Disbursement this Period 849.01
City Memphis State TN Zip Code 38116	Purpose of Disbursement Shipping services Category/Type 003	
Candidate Name		Transaction ID : SB17.5077
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> 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. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 3875 Airways, Module H3 Department 4634		Amount of Each Disbursement this Period 235.18
City Memphis State TN Zip Code 38116	Purpose of Disbursement Shipping services Category/Type 003	
Candidate Name		Transaction ID : SB17.5088
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> 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>c. Georgia Department of Natural Resources</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 1 Conservation Way		Amount of Each Disbursement this Period 550.00
City Brunswick State GA Zip Code 31520	Purpose of Disbursement Ticket fees for Annual Banquet Dinner Category/Type 007	
Candidate Name		Transaction ID : SB17.4880
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1634.19
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4880

Weekend for Wildlife Event (2) Dinner tickets at \$275.00 per person.

Form/Schedule:

Transaction ID:

**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 98 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Georgia Historical Society</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014		
Mailing Address 501 Whitaker Street			Amount of Each Disbursement this Period 590.00		
City Savannah	State GA	Zip Code 31401	Transaction ID : SB17.4903		
Purpose of Disbursement Ticket fees for Annual Banquet Dinner		Category/Type 007			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. Georgia Republican Party</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014		
Mailing Address P. O. Box 550008			Amount of Each Disbursement this Period 5220.00		
City Atlanta	State GA	Zip Code 30355	Transaction ID : SB17.4953		
Purpose of Disbursement Candidate filing fee		Category/Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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>c. Google Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014		
Mailing Address 1600 Amphitheatre Parkway			Amount of Each Disbursement this Period 200.00		
City Mountain View	State CA	Zip Code 94043	Transaction ID : SB17.5042		
Purpose of Disbursement Advertising		Category/Type 004			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6010.00
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4903

(2) tickets at \$295.00 each for the 2014 Trustees Gala Event.

Form/Schedule:

Transaction ID:

**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 100 OF 148	
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Google Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : SB17.5044</b>
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Advertising 004 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. Google Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.5046</b>
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Advertising 004 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>c. Intuit Online Payroll</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 1046.57 <b>Transaction ID : SB17.4827</b>
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Payroll taxes 001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1896.57
<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 101 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Intuit Online Payroll</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 214.26 <b>Transaction ID : SB17.4828</b>
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Payroll taxes Candidate Name Category/Type 001	
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. Intuit Online Payroll</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 277.52 <b>Transaction ID : SB17.4842</b>
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Payroll taxes Candidate Name Category/Type 001	
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>c. Intuit Online Payroll</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 154.18 <b>Transaction ID : SB17.4850</b>
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Payroll taxes Candidate Name Category/Type 001	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	645.96
<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 102 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Intuit Online Payroll</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 85.00
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Payroll taxes	001 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. Intuit Online Payroll</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 15.00
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Payroll processing fee	001 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>c. Intuit Online Payroll</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 4271.49
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Payroll taxes	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4371.49
<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 103 OF 148	
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Intuit Online Payroll</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 25 / 2014</b>
Mailing Address <b>2632 Marine Way</b>		Amount of Each Disbursement this Period <b>89.00</b>
City <b>Mountain View</b>	State <b>CA</b>	
Zip Code <b>94043</b>	Purpose of Disbursement <b>Payroll processing fee</b>	<b>Transaction ID : SB17.4966</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Intuit Online Payroll</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 05 / 2014</b>
Mailing Address <b>2632 Marine Way</b>		Amount of Each Disbursement this Period <b>4511.49</b>
City <b>Mountain View</b>	State <b>CA</b>	
Zip Code <b>94043</b>	Purpose of Disbursement <b>Payroll</b>	<b>Transaction ID : SB17.5001</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Intuit Online Payroll</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 26 / 2014</b>
Mailing Address <b>2632 Marine Way</b>		Amount of Each Disbursement this Period <b>91.00</b>
City <b>Mountain View</b>	State <b>CA</b>	
Zip Code <b>94043</b>	Purpose of Disbursement <b>Payroll processing fee</b>	<b>Transaction ID : SB17.5071</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4691.49</b>
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.5001

Payroll taxes for February.

Form/Schedule:

Transaction ID:

**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 105 OF 148	
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph David Advertising</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address P. O. Box 1176		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.4913</b>
City Muncie	State IN	
Zip Code 47308	Purpose of Disbursement Logo design	Category/ Type 004
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. Joseph David Advertising</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2014
Mailing Address P. O. Box 1176		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : SB17.5003</b>
City Muncie	State IN	
Zip Code 47308	Purpose of Disbursement Logo design	Category/ Type 003
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>c. Regina Mabry</b>		Date of Disbursement MM / DD / YYYY 01 / 30 / 2014
Mailing Address P O Box 20097		Amount of Each Disbursement this Period 1285.41 <b>Transaction ID : SB17.4864</b>
City Saint Simons Island	State GA	
Zip Code 31522	Purpose of Disbursement Payroll	Category/ Type 001
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3535.41
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.5003

\$500.00 Logo design work and \$250.00 for business cards.

Form/Schedule:

Transaction ID:

**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 107 OF 148	
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Regina Mabry</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address P O Box 20097		Amount of Each Disbursement this Period 1667.16 <b>Transaction ID : SB17.4982</b>
City Saint Simons Island	State GA	
Zip Code 31522	Purpose of Disbursement Payroll	Category/ Type 001
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. Regina Mabry</b>		Date of Disbursement MM / DD / YYYY 03 / 28 / 2014
Mailing Address P O Box 20097		Amount of Each Disbursement this Period 1285.41 <b>Transaction ID : SB17.5081</b>
City Saint Simons Island	State GA	
Zip Code 31522	Purpose of Disbursement Payroll	Category/ Type 001
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>c. Ron McKay</b>		Date of Disbursement MM / DD / YYYY 03 / 18 / 2014
Mailing Address 205 Enterprise Street		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.5053</b>
City Brunswick	State GA	
Zip Code 31520	Purpose of Disbursement Transportation	Category/ Type 003
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3252.57
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.5053

Transportation-related costs for event.

Form/Schedule:

Transaction ID:

**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 109 OF 148	
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. McKenna Long &amp; Aldridge LLP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 303 Peachtree Street NE Suite 5300		Amount of Each Disbursement this Period 6000.00 <b>Transaction ID : SB17.4833</b>
City Atlanta State GA Zip Code 30308	Purpose of Disbursement Legal fees 001 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. McKenna Long &amp; Aldridge LLP</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 303 Peachtree Street NE Suite 5300		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.4960</b>
City Atlanta State GA Zip Code 30308	Purpose of Disbursement Legal fee 001 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>c. Parlay Political LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address P O Box 1386		Amount of Each Disbursement this Period 342.50 <b>Transaction ID : SB17.4832</b>
City Athens State GA Zip Code 30603	Purpose of Disbursement Fundraising supplies 006 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8342.50
<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 110 OF 148	
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Parlay Political LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address P O Box 1386		Amount of Each Disbursement this Period 4509.07 <b>Transaction ID : SB17.4837</b>
City Athens	State GA	
Zip Code 30603	Purpose of Disbursement Photography services	Category/ Type 004
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. Parlay Political LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address P O Box 1386		Amount of Each Disbursement this Period 1812.00 <b>Transaction ID : SB17.4839</b>
City Athens	State GA	
Zip Code 30603	Purpose of Disbursement Palm cards	Category/ Type 006
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>c. Parlay Political LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address P O Box 1386		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.4840</b>
City Athens	State GA	
Zip Code 30603	Purpose of Disbursement Voter file list	Category/ Type 003
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8821.07
<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 111 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Parlay Political LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address P O Box 1386		Amount of Each Disbursement this Period 13000.00 <b>Transaction ID : SB17.4990</b>
City Athens	State GA	
Zip Code 30603	Purpose of Disbursement General Campaign Consulting	Category/ Type 003
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. Parlay Political LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address P O Box 1386		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.4991</b>
City Athens	State GA	
Zip Code 30603	Purpose of Disbursement Media Consulting	Category/ Type 003
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>c. Parlay Political LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address P O Box 1386		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.5024</b>
City Athens	State GA	
Zip Code 30603	Purpose of Disbursement Media consulting	Category/ Type 003
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15000.00
<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 112 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Parlay Political LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address P O Box 1386		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.5025</b>
City Athens	State GA	
Zip Code 30603	Purpose of Disbursement General Campaign Consulting	Category/ Type 003
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. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 144 2nd Street, 1st Floor		Amount of Each Disbursement this Period 29.00 <b>Transaction ID : SB17.5089</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit card fees	Category/ Type 001
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>C. Premier Printing Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 3694 Community Road		Amount of Each Disbursement this Period 384.78 <b>Transaction ID : SB17.4848</b>
City Brunswick	State GA	
Zip Code 31520	Purpose of Disbursement Letterhead/envelopes/stationary	Category/ Type 006
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3413.78
<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 113 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Premier Printing Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 3694 Community Road		Amount of Each Disbursement this Period 483.36
City Brunswick	State GA	
Zip Code 31520	Purpose of Disbursement Printing	Category/ Type 003
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. Premier Printing Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2014
Mailing Address 3694 Community Road		Amount of Each Disbursement this Period 254.40
City Brunswick	State GA	
Zip Code 31520	Purpose of Disbursement Printing	Category/ Type 006
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>C. Premier Printing Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 3694 Community Road		Amount of Each Disbursement this Period 610.56
City Brunswick	State GA	
Zip Code 31520	Purpose of Disbursement Printing	Category/ Type 006
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1348.32
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4852

Purchase of buisness cards and envelopes.

Form/Schedule: SB17

Transaction ID: SB17.4941

Business cards for campaign members.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4967

Printing of Contribution remittance envelopes - 5000.

Form/Schedule:

Transaction ID:

**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 116 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Premier Printing Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 3694 Community Road			Amount of Each Disbursement this Period 111.62 <b>Transaction ID : SB17.4968</b>
City Brunswick	State GA	Zip Code 31520	
Purpose of Disbursement Printing	Candidate Name		Category/ Type 003
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. Premier Printing Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 3694 Community Road			Amount of Each Disbursement this Period 241.48 <b>Transaction ID : SB17.5022</b>
City Brunswick	State GA	Zip Code 31520	
Purpose of Disbursement Printing	Candidate Name		Category/ Type 003
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>C. Premier Printing Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 3694 Community Road			Amount of Each Disbursement this Period 55.00 <b>Transaction ID : SB17.5023</b>
City Brunswick	State GA	Zip Code 31520	
Purpose of Disbursement Printing	Candidate Name		Category/ Type 003
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	408.10
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4968

Printing of Meet & Greet invitations.

Form/Schedule: SB17

Transaction ID: SB17.5022

Printing of invitations for Sandersville Meet & Greet Event.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.5023

Printing of envelopes for engage and re-engage letters.

Form/Schedule:

Transaction ID:

**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 119 OF 148	
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. QGiv, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 30 / 2014</b>
Mailing Address 53 Lake Morton Drive		Amount of Each Disbursement this Period <b>249.00</b> <b>Transaction ID : SB17.4865</b>
City Lakeland	State FL	
Zip Code 33801	Purpose of Disbursement Credit card fees	Category/ Type <b>001</b>
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. QGiv, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 30 / 2014</b>
Mailing Address 53 Lake Morton Drive		Amount of Each Disbursement this Period <b>0.87</b> <b>Transaction ID : SB17.4868</b>
City Lakeland	State FL	
Zip Code 33801	Purpose of Disbursement Credit card fees	Category/ Type <b>001</b>
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>c. Red Pledge</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 04 / 2014</b>
Mailing Address 4400 North Point Parkway, Suite 19		Amount of Each Disbursement this Period <b>125.87</b> <b>Transaction ID : SB17.5000</b>
City Alpharetta	State GA	
Zip Code 30022	Purpose of Disbursement Credit card fees	Category/ Type <b>001</b>
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>375.74</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 120 OF 148	
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Allison Ross</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 110 Hampton Point Drive		Amount of Each Disbursement this Period 904.65 <b>Transaction ID : SB17.4984</b>
City St. Simons Island	State GA	
Zip Code 31522	Purpose of Disbursement Payroll	Category/ Type 001
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. Allison Ross</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2014
Mailing Address 110 Hampton Point Drive		Amount of Each Disbursement this Period 10.63 <b>Transaction ID : SB17.5014</b>
City St. Simons Island	State GA	
Zip Code 31522	Purpose of Disbursement Fundraising supplies	Category/ Type 003
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>C. Allison Ross</b>		Date of Disbursement MM / DD / YYYY 03 / 28 / 2014
Mailing Address 110 Hampton Point Drive		Amount of Each Disbursement this Period 859.31 <b>Transaction ID : SB17.5082</b>
City St. Simons Island	State GA	
Zip Code 31522	Purpose of Disbursement Payroll	Category/ Type 001
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1774.59
<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 121 OF 148	
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sal's Neighborhood Pizzeria</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 3415 Frederica Road		Amount of Each Disbursement this Period 87.97
City Saint Simons Island	State GA	
Zip Code 31522	Purpose of Disbursement Meals	Transaction ID : SB17.4860
Candidate Name	Category/ Type 007	
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. Savannah Area Republican Women's Club</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 23756 Highway 144		Amount of Each Disbursement this Period 100.00
City Richmond Hill	State GA	
Zip Code 31324	Purpose of Disbursement Ticket fees for networking	Transaction ID : SB17.4985
Candidate Name	Category/ Type 007	
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>c. Suzanne Scaglione</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 112 Coke Street		Amount of Each Disbursement this Period 777.15
City St. Simons Island	State GA	
Zip Code 31522	Purpose of Disbursement Catering costs for fundraiser	Transaction ID : SB17.5051
Candidate Name	Category/ Type 003	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	965.12
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4985

(2) tickets to Masquerade Ball Dinner.

Form/Schedule: SB17

Transaction ID: SB17.5051

Catering for McGuirk Meet & Greet Event.

**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 123 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Skidaway Island Republican Club</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address P O Box 15165		Amount of Each Disbursement this Period 27152.50 <b>Transaction ID : SB17.4882</b>
City Savannah State GA Zip Code 31416	Purpose of Disbursement Ticket fees for dinner Candidate Name Category/Type 007	
Office Sought: House Senate 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. Skidaway Island Republican Club</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address P O Box 15165		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.4929</b>
City Savannah State GA Zip Code 31416	Purpose of Disbursement Ticket fees for dinner Candidate Name Category/Type 007	
Office Sought: House Senate 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>c. Smart Media Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 1427 Leslie Avenue Suite 100		Amount of Each Disbursement this Period 27152.50 <b>Transaction ID : SB17.5034</b>
City Alexandria State VA Zip Code 22301	Purpose of Disbursement Advertising Candidate Name Category/Type 004	
Office Sought: House Senate President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	27152.50
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4882

(10) tickets for the Annual Dinner a \$125.00 per person.

Form/Schedule: SB17

Transaction ID: SB17.4929

(2) tickets at \$125.00 per person for Annual Banquet Dinner (Wells & Rachel).

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.5034

Television advertising costs.

Form/Schedule:

Transaction ID:

**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 126 OF 148	
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Smart Media Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1427 Leslie Avenue Suite 100		Amount of Each Disbursement this Period 22567.50 <b>Transaction ID : SB17.5083</b>
City Alexandria State VA Zip Code 22301	Purpose of Disbursement Advertising 004 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. Something Else Strategies, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 112 Lantern Ridge Drive		Amount of Each Disbursement this Period 16000.00 <b>Transaction ID : SB17.4955</b>
City Easley State SC Zip Code 29642	Purpose of Disbursement Photography services 004 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>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 58 Altama Village Drive		Amount of Each Disbursement this Period 43.76 <b>Transaction ID : SB17.5064</b>
City Brunswick State GA Zip Code 31525	Purpose of Disbursement Office supplies 001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	38611.26
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.5083

Television advertising costs.

Form/Schedule: SB17

Transaction ID: SB17.4955

Photography services for television advertising.

**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 128 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Polling Company</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 1220 Connecticut Avenue, NW			Amount of Each Disbursement this Period 954.20
City Washington	State DC	Zip Code 20036	
Purpose of Disbursement Travel	Candidate Name		<b>Transaction ID : SB17.4898</b>
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:	Category/Type 002		

Full Name (Last, First, Middle Initial) <b>B. The Stoneridge Group LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 4400 North Point Parkway Suite 190			Amount of Each Disbursement this Period 2057.09
City Alpharetta	State GA	Zip Code 30022	
Purpose of Disbursement Website services	Candidate Name		<b>Transaction ID : SB17.4841</b>
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:	Category/Type 006		

Full Name (Last, First, Middle Initial) <b>c. The Stoneridge Group LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 4400 North Point Parkway Suite 190			Amount of Each Disbursement this Period 19.95
City Alpharetta	State GA	Zip Code 30022	
Purpose of Disbursement Web hosting	Candidate Name		<b>Transaction ID : SB17.4851</b>
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:	Category/Type 004		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3031.24
<b>TOTAL</b> This Period (last page this line number only) .....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4898

Reimbursement for travel expenses for meeting held with representative of The Polling Company.

Form/Schedule: SB17

Transaction ID: SB17.4851

Web hosting of website.

**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 130 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Stoneridge Group LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014	
Mailing Address 4400 North Point Parkway Suite 190			Amount of Each Disbursement this Period 3750.00	
City Alpharetta	State GA	Zip Code 30022	Transaction ID : SB17.4902	
Purpose of Disbursement Website services		Category/ Type 004		
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. The Stoneridge Group LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014	
Mailing Address 4400 North Point Parkway Suite 190			Amount of Each Disbursement this Period 947.00	
City Alpharetta	State GA	Zip Code 30022	Transaction ID : SB17.4952	
Purpose of Disbursement Fundraising supplies		Category/ Type 006		
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>c. The Stoneridge Group LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014	
Mailing Address 4400 North Point Parkway Suite 190			Amount of Each Disbursement this Period 19.95	
City Alpharetta	State GA	Zip Code 30022	Transaction ID : SB17.4962	
Purpose of Disbursement Web hosting		Category/ Type 004		
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4716.95
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4902

Final payment for completion of website.

Form/Schedule: SB17

Transaction ID: SB17.4952

Purchase of Bumper Stickers and Lapel Stickers.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4962

Web hosting for website.

Form/Schedule:

Transaction ID:

**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 133 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Stoneridge Group LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 4400 North Point Parkway Suite 190		Amount of Each Disbursement this Period 11159.00 <b>Transaction ID : SB17.4965</b>
City Alpharetta State GA Zip Code 30022	Purpose of Disbursement Signs 006 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. The Stoneridge Group LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 4400 North Point Parkway Suite 190		Amount of Each Disbursement this Period 19.95 <b>Transaction ID : SB17.5063</b>
City Alpharetta State GA Zip Code 30022	Purpose of Disbursement Web hosting 004 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>c. The Stoneridge Group LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 4400 North Point Parkway Suite 190		Amount of Each Disbursement this Period 7503.50 <b>Transaction ID : SB17.5068</b>
City Alpharetta State GA Zip Code 30022	Purpose of Disbursement Direct Mail Services 003 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	18682.45
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4965

Fees for campaign signs and yard sign production.

Form/Schedule: SB17

Transaction ID: SB17.5063

Web hosting for website.

**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 135 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement
Mailing Address 1705 Frederica Road		M M / D D / Y Y Y Y 01 / 06 / 2014
City Saint Simons Island	State GA	Zip Code 31522
Purpose of Disbursement Postage	Category/ Type 003	Amount of Each Disbursement this Period 138.00
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:		

**Transaction ID : SB17.4825**

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement
Mailing Address 1705 Frederica Road		M M / D D / Y Y Y Y 01 / 30 / 2014
City Saint Simons Island	State GA	Zip Code 31522
Purpose of Disbursement Postage	Category/ Type 003	Amount of Each Disbursement this Period 245.00
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:		

**Transaction ID : SB17.4884**

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement
Mailing Address 1705 Frederica Road		M M / D D / Y Y Y Y 02 / 11 / 2014
City Saint Simons Island	State GA	Zip Code 31522
Purpose of Disbursement Postage	Category/ Type 003	Amount of Each Disbursement this Period 42.00
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:		

**Transaction ID : SB17.4923**

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	425.00
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4884

Purchased (5) rolls of stamps for fundraising letters.

Form/Schedule:

Transaction ID:

**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 137 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement
Mailing Address 1705 Frederica Road		MM / DD / YYYY 02 / 13 / 2014
City Saint Simons Island	State GA	Zip Code 31522
Purpose of Disbursement Postage	Category/ Type 003	Amount of Each Disbursement this Period 123.20
Candidate Name	Transaction ID : SB17.4928	
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. USPS</b>		Date of Disbursement
Mailing Address 1705 Frederica Road		MM / DD / YYYY 02 / 20 / 2014
City Saint Simons Island	State GA	Zip Code 31522
Purpose of Disbursement Postage	Category/ Type 003	Amount of Each Disbursement this Period 294.00
Candidate Name	Transaction ID : SB17.4951	
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>C. USPS</b>		Date of Disbursement
Mailing Address 1705 Frederica Road		MM / DD / YYYY 03 / 10 / 2014
City Saint Simons Island	State GA	Zip Code 31522
Purpose of Disbursement Postage	Category/ Type 003	Amount of Each Disbursement this Period 245.00
Candidate Name	Transaction ID : SB17.5013	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	662.20
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4951

Purchase of (6) rolls of stamps.

Form/Schedule: SB17

Transaction ID: SB17.5013

Purchase (5) rolls of stamps.

**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 139 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 1705 Frederica Road		Amount of Each Disbursement this Period 245.00
City Saint Simons Island	State GA	
Zip Code 31522	Purpose of Disbursement Postage	<b>Transaction ID : SB17.5026</b>
Candidate Name	003 Category/ Type	
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. VRMHQ</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 190 Monroe Ave NW, 5th Floor		Amount of Each Disbursement this Period 2098.00
City Grand Rapids	State MI	
Zip Code 49503	Purpose of Disbursement Database services	<b>Transaction ID : SB17.4900</b>
Candidate Name	003 Category/ Type	
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>C. VRMHQ</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 190 Monroe Ave NW, 5th Floor		Amount of Each Disbursement this Period 1599.00
City Grand Rapids	State MI	
Zip Code 49503	Purpose of Disbursement Database services	<b>Transaction ID : SB17.5067</b>
Candidate Name	003 Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3942.00
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.5026

Purchase (5) rolls of stamps.

Form/Schedule:

Transaction ID:

**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 141 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Watermarks Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 295-A Redfern Village		Amount of Each Disbursement this Period 123.10 <b>Transaction ID : SB17.5002</b>
City St. Simons Island	State GA	
Zip Code 31522	Purpose of Disbursement Letterhead/envelopes/stationary	Category/ Type 003
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. Tim Waters</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 225 Monarch Drive		Amount of Each Disbursement this Period 65.26 <b>Transaction ID : SB17.4926</b>
City Savannah	State GA	
Zip Code 30269	Purpose of Disbursement Reimbursement for campaign sign holder	Category/ Type 006
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>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 58 Altama Village Drive		Amount of Each Disbursement this Period 65.26 <b>Transaction ID : SB17.4926.0</b> <b>[MEMO ITEM]</b>
City Brunswick	State GA	
Zip Code 31525	Purpose of Disbursement Campaign signs	Category/ Type 006
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	188.36
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4926

Reimbursement for campaign sign holder.

Form/Schedule: SB17

Transaction ID: SB17.4926.0

Campaign signs.

**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 143 OF 148			
	<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)  
**John McCallum for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tim Waters</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 225 Monarch Drive		Amount of Each Disbursement this Period 381.36
City Savannah	State GA Zip Code 30269	
Purpose of Disbursement Mileage/mileage reimbursement	Category/Type 002	<b>Transaction ID : SB17.4986</b>
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 MM / DD / YYYY
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 MM / DD / YYYY
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).....	381.36
<b>TOTAL</b> This Period (last page this line number only).....	203814.85

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4986

Campaign Volunteer from Savannah reimbursement for mileage from Savannah where he lives to St. Simons Island, GA.

Form/Schedule:

Transaction ID:

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4807

John McCallum for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

John McCallum

Primary

General

Other (specify) ▼

Mailing Address

P O Box 20097

City

State

ZIP Code

Saint Simons Island

GA

31522

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

100000.00

0.00

100000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M /

D 31 D /

Y 2013 Y

M M /

D D /

Y NONE Y

5.00 % (apr)

Yes

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:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
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)..... ▶

100000.00

**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.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : SC/10.4807

Personal funds

Form/Schedule:

Transaction ID:

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5092

John McCallum for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

John McCallum

Primary

General

Other (specify) ▼

Mailing Address

P O Box 20097

City

State

ZIP Code

Saint Simons Island

GA

31522

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

100000.00

0.00

100000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M 03 / D 31 / Y 2014 Y

M M / D D / Y None Y

5.00 % (apr)

Yes  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:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
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)..... ▶

100000.00

**TOTALS** This Period (last page in this line only)..... ▶

200000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : SC/10.5092

Personal Funds.

Form/Schedule:

Transaction ID: