

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
Rick W. Allen for Congress

ADDRESS (number and street) P. O. Box 338
 Check if different than previously reported. (ACC) Augusta GA 30903

2. **FEC IDENTIFICATION NUMBER** C C00504019 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
Augusta GA 30903 GA 12

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 GA
11 / 04 / 2014

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
10 / 16 / 2014 through 11 / 24 / 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 E. G. Meybohm
Signature of Treasurer E. G. Meybohm *[Electronically Filed]* Date M M / D D / Y Y Y Y
01 / 04 / 2015

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Rick W. Allen 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))....	593143.77	1391942.16
(b) Total Contribution Refunds (from Line 20(d))	1000	3700
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	592143.77	1388242.16
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	441468.33	2309442.09
(b) Total Offsets to Operating Expenditures (from Line 14).....		550
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	441468.33	2308892.09
8. Cash on Hand at Close of Reporting Period (from Line 27).....	27068.52	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	1191524.56	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Rick W. Allen for Congress

Report Covering the Period: From: 10 / 16 / 2014 To: 11 / 24 / 2014

I. RECEIPTS

COLUMN A Total this Period

COLUMN B Election Cycle Total as of

COLUMN C Total for

11 / 04 / 2014 (date of general election)

11 / 05 / 2014 (date after general election)

through

11 / 24 / 2014 (last day of reporting period)

11. CONTRIBUTIONS

(other than loans) FROM:

- (a) Individuals/Persons Other than Political Committees
 - (i) Itemized (use Schedule A)

93639

1024427

8570

(ii) Unitemized

11821

71813

1925

(iii) Total of contributions from individuals

105460

1096240

10495

(b) Political Party Committees

(c) Other Political Committees

47250

218240.65

19500

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
440433.77	77461.51	440433.77
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
593143.77	1391942.16	470428.77
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	9289.22	
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
270000	1075000	
(b) All Other Loans		
(c) TOTAL LOANS (add Lines 13(a) and (b))		
270000	1075000	
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
	550	
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
863143.77	2476781.38	470428.77

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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Write or Type Committee Name

Rick W. Allen for Congress

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
441468.33	2309442.09	24126.48
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
505000	90000	505000
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
505000	90000	505000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
	2700	
(b) Political Party Committees		

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

1000	1000	
------	------	--

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

1000	3700	
------	------	--

21. OTHER DISBURSEMENTS

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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

947468.33	2403142.09	529126.48
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

592143.77	1388242.16	
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

	2308892.09	
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	111393.08
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	863143.77
25. SUBTOTAL (add Line 23 and Line 24).....	974536.85
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	947468.33
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	27068.52

**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 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
On the Levee Deli LLC

Mailing Address 1450 Greene Street Ste 600

City Augusta State GA Zip Code 30901

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11Ai-CN4422

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Brad Usry

Mailing Address 1112 Council Dr

City Augusta State GA Zip Code 30909

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

Name of Employer Occupation
Fatman's Cafe Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2660**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11Ai-CN4423

Amount of Each Receipt this Period
500

Partnership-On the Levee Deli LLC

[MEMO ITEM]
 \$500.00 MEMO Partnership Attributed

C. Full Name (Last, First, Middle Initial)
Mrs. W. Franklin Abbott III

Mailing Address P.O. Box 3466

City Augusta State GA Zip Code 30914

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

Name of Employer Occupation
Abbott Oil Executive

Receipt For: 2015
 Primary General
 Other (specify) **General 2014 Debt**

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2014

Transaction ID : SA11Ai-CN4552

Amount of Each Receipt this Period
500

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 8 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Forester B Adams

Mailing Address 1111 Peachtree Rd

City Augusta State GA Zip Code 30909

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

Name of Employer Meybohm Scarborough Insurance Occupation Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11Ai-CN4384

Amount of Each Receipt this Period
 1000

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

Mailing Address 3570 Pebble Beach

City Martinez State GA Zip Code 30907

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

Name of Employer Ahs And Associates Occupation Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4286

Amount of Each Receipt this Period
 500

C. Full Name (Last, First, Middle Initial)
J. Charles Allen Jr

Mailing Address 4897 Hereford Farm Rd

City Evans State GA Zip Code 30809

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

Name of Employer Atkins & Associates Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4275**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11Ai-CN4408

Amount of Each Receipt this Period
 1600

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 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Kay K Allen

Mailing Address 4897 Hereford Farm Rd

City: Evans State: GA Zip Code: 30809

FEC ID number of contributing federal political committee: C

Name of Employer: Columbia County Occupation: Elected Official

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1400

Date of Receipt: 10 / 31 / 2014

Transaction ID : SA11Ai-CN4409

Amount of Each Receipt this Period: 400

B. Full Name (Last, First, Middle Initial)
J.T. Anderson Jr

Mailing Address 949 Johns Rd

City: Augusta State: GA Zip Code: 30904

FEC ID number of contributing federal political committee: C

Name of Employer: Information Requested Occupation: Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 10 / 24 / 2014

Transaction ID : SA11Ai-CN4289

Amount of Each Receipt this Period: 500

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

Mailing Address P O Box 732

City: Statesboro State: GA Zip Code: 30459

FEC ID number of contributing federal political committee: C

Name of Employer: Forest Heights Water Works Occupation: Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300

Date of Receipt: 11 / 04 / 2014

Transaction ID : SA11Ai-CN4445

Amount of Each Receipt this Period: 100

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 10 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Philip F. Anderson

Mailing Address 3019 Lake Forest Drive

City Augusta State GA Zip Code 30909

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

Name of Employer RBW Logistics Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4318

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. John C. Apostol

Mailing Address 425 Armstrong Way

City Evans State GA Zip Code 30809

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4306

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Charles R. Baldwin

Mailing Address 3140 Westminster Drive

City Augusta State GA Zip Code 30909

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 04 / 2014

Transaction ID : SA11Ai-CN4495

Amount of Each Receipt this Period
250

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 11 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Lee Bo Banks

Mailing Address 3514 Preston Trl

City State Zip Code
Martinez GA 30907

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

Name of Employer Occupation
Banks Drug Pharmacist

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
11 / 10 / 2014

Transaction ID : SA11Ai-CN4502

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. Clarence T Barinowski

Mailing Address 2387 Louisville Rd

City State Zip Code
Appling GA 30802

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11Ai-CN4222

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr. G. Holmes Bell IV

Mailing Address 805 Dancy Ave

City State Zip Code
Savannah GA 31419

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

Name of Employer Occupation
HGBD Inc. Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11Ai-CN4312

Amount of Each Receipt this Period
250

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 12 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Davis Beman

Mailing Address 699 Broad Street Suite 400

City Augusta State GA Zip Code 30901

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

Name of Employer Blanchard & Calhoun Occupation Commercial Real Estate Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11Ai-CN4359

Amount of Each Receipt this Period
 100

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

Mailing Address P.O. Box 1396

City Brunswick State GA Zip Code 31521

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11Ai-CN4363

Amount of Each Receipt this Period
 250

C. Full Name (Last, First, Middle Initial)
Mr. R Daniel Blanton

Mailing Address 3530 Wheeler Rd

City Augusta State GA Zip Code 30909

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

Name of Employer Georgia Bank & Trust Occupation Banker

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 19 / 2014

Transaction ID : SA11Ai-CN4539

Amount of Each Receipt this Period
 500

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

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

850.00

**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 147
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Judy P. Booker		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address P.O. Box 30172		Transaction ID : SA11Ai-CN4229	
City Sea Island	State GA	Zip Code 31561	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

Full Name (Last, First, Middle Initial) B. Mr. Grier C Bovard		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address 2918 Lake Forest Dr		Transaction ID : SA11Ai-CN4448	
City Augusta	State GA	Zip Code 30909	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000	
Name of Employer Augusta Iron & Steel Works Inc.	Occupation Executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000		

Full Name (Last, First, Middle Initial) C. Dr. Robert L Brand		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address PO Box 14039		Transaction ID : SA11Ai-CN4488	
City Augusta	State GA	Zip Code 30919	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer Augusta Orthopedic and Sports	Occupation Physician		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700		

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	[Empty Field]

**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 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Bennie Bray

Mailing Address 8214 Westchester Dr
Apt 800

City Dallas State TX Zip Code 75225

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

Name of Employer Self Occupation Investments

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11Ai-CN4236

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Stephanie Bray

Mailing Address 8214 Westchester Dr
Apt 800

City Dallas State TX Zip Code 75225

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11Ai-CN4237

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Dr. James H. Braziel III

Mailing Address 919 Walke Dairy Road

City Dublin State GA Zip Code 31021

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

Name of Employer Middle GA Anesthesia Assoc. Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11Ai-CN4264

Amount of Each Receipt this Period
250

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 15 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. William B Brigham

Mailing Address 3150 Skinner Mill Rd

City Augusta State GA Zip Code 30909

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

Name of Employer Brigham Woods Occupation Investments

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11Ai-CN4490

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Vince L. Brogdon

Mailing Address 4885 Somerset Drive

City Evans State GA Zip Code 30809

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

Name of Employer Gold Cross EMT Occupation Executive

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 19 / 2014

Transaction ID : SA11Ai-CN4540

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Mr. Donald Brown

Mailing Address 1690 Redbourne Drive

City Atlanta State GA Zip Code 30350

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

Name of Employer Self Occupation Dentist

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 13 / 2014

Transaction ID : SA11Ai-CN4529

Amount of Each Receipt this Period
250

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 16 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Candy Burgess

Mailing Address PO Box 4146

City Macon State GA Zip Code 31208

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4311

Amount of Each Receipt this Period
800

B. Full Name (Last, First, Middle Initial)
Malcolm Burgess

Mailing Address PO Box 4146

City Macon State GA Zip Code 31208

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

Name of Employer Burgess Pigment Co. Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4310

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Jon G. Burns

Mailing Address 5829 Cloy Kildare Road

City Newington State GA Zip Code 30446

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

Name of Employer Burns Supply Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 04 / 2014

Transaction ID : SA11Ai-CN4464

Amount of Each Receipt this Period
500

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 17 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Robert L. Carmichael Jr

Mailing Address 901 Piney Woods Dr

City Lagrange State GA Zip Code 30240

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

Name of Employer Commercial Bank & Trust Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4274

Amount of Each Receipt this Period
500

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

Mailing Address 10 Melanie Way

City Evans State GA Zip Code 30809

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4287

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr. Charles G Caye Jr

Mailing Address PO Box 3965

City Augusta State GA Zip Code 30914

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

Name of Employer Self Employed Occupation Real Estate Developer

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2014

Transaction ID : SA11Ai-CN4542

Amount of Each Receipt this Period
1000

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 18 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Eddie Cheeks

Mailing Address 85 Conifer Circle

City Augusta State GA Zip Code 30909

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

Name of Employer Self Occupation Physician

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date **500**

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

Transaction ID : SA11Ai-CN4520

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
J. Samuel Choate Jr

Mailing Address 103 Spyglass

City St Simons Island State GA Zip Code 31522

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

Name of Employer Atwood Law Firm P.C. Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11Ai-CN4366

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
J.R. Cleveland

Mailing Address P.O. Box 2958

City Gainesville State GA Zip Code 30503

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

Name of Employer Gainesville Milling Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11Ai-CN4376

Amount of Each Receipt this Period
500

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 19 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
William Cleveland

Mailing Address 4835 Doe Run

City Evans State GA Zip Code 30809

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

Name of Employer The Cleveland Group CPAs Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

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

Transaction ID : SA11Ai-CN4476

Amount of Each Receipt this Period
1000

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

Mailing Address 4800 Atlanta Highway

City Bogart State GA Zip Code 30622

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

Name of Employer Clyde Armory Inc. Occupation CEO Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11Ai-CN4392

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Peggy W. Cooper

Mailing Address 507 Loyola Drive

City Augusta State GA Zip Code 30909

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

Name of Employer Cooper & Co. CPAs Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11Ai-CN4438

Amount of Each Receipt this Period
100

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Peggy W. Cooper

Mailing Address 507 Loyola Drive

City Augusta State GA Zip Code 30909

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

Name of Employer Cooper & Co. CPAs Occupation CPA

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11Ai-CN4551

Amount of Each Receipt this Period
300

B. Full Name (Last, First, Middle Initial)
Mr. John I. Crews Jr

Mailing Address 306 Marston Lane

City Richmond State VA Zip Code 23221

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11Ai-CN4269

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Ann B. Crider

Mailing Address P.O. Box 398

City Stillmore State GA Zip Code 30464

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2400**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 12 / 2014

Transaction ID : SA11Ai-CN4493

Amount of Each Receipt this Period
2400

Reattributed from Billy Crider

[MEMO ITEM]
Reattribution

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 21 OF 147
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) Billy Crider		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 15 / 2014
Mailing Address P.O. Box 398		Transaction ID : SA11Ai-CN4169
City Stillmore	State GA	Zip Code 30464
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000	
Name of Employer Crider Poultry Company	Occupation President	See previous rpt Reattributed
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000	[MEMO ITEM]

Full Name (Last, First, Middle Initial) Billy Crider		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 12 / 2014
Mailing Address P.O. Box 398		Transaction ID : SA11Ai-CN4492
City Stillmore	State GA	Zip Code 30464
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period -2400	
Name of Employer	Occupation	Reattributed to Ann Crider
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date -2400	[MEMO ITEM] Reattributed

Full Name (Last, First, Middle Initial) Stephen R. Croft		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 24 / 2014
Mailing Address 7023 Banbury Way		Transaction ID : SA11Ai-CN4303
City Grovetown	State GA	Zip Code 30813
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150	
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL 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 22 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Herbert Daniel Jr

Mailing Address 2211 Perry Road

City Claxton State GA Zip Code 30417

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

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11Ai-CN4368

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. Wayne Dasher

Mailing Address P.O. Box 10

City Glennville State GA Zip Code 30427

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

Name of Employer Claxton Bank Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11Ai-CN4460

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Willie S. Dasher Jr

Mailing Address PO Box 60

City Springfield State GA Zip Code 31329

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

Name of Employer Dasher Insurance Agency Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11Ai-CN4442

Amount of Each Receipt this Period
500

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 23 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
C. Norwood Davis

Mailing Address 1554 Chadwick Point Court

City Lawrenceville State GA Zip Code 30043

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

Name of Employer 12Stone Church Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11Ai-CN4370

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Dr. James B. Davis

Mailing Address 52 Chigoe Ln

City Appling State GA Zip Code 30802

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

Name of Employer Brown & Radiology Assoc. Occupation Radiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11Ai-CN4244

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Pat Dixon

Mailing Address 334 Dixon Lake Circle

City Vidalia State GA Zip Code 30474

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11Ai-CN4220

Amount of Each Receipt this Period
300

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mike Downing

Mailing Address 3040 Pine Needle Road

City Augusta State GA Zip Code 30909

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

Name of Employer Gold Mech Inc. Occupation Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11Ai-CN4405

Amount of Each Receipt this Period
2400

B. Full Name (Last, First, Middle Initial)
Mr. John F. Flournoy

Mailing Address P.O. Box 6566

City Columbus State GA Zip Code 31917

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

Name of Employer Flournoy Development Company Occupation Real Estate Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11Ai-CN4356

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Foster Friess

Mailing Address P.O. Box 9790
115 E. Snow King Avenue

City Jackson State WY Zip Code 83002

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

Name of Employer Brandywine Funds Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11Ai-CN4232

Amount of Each Receipt this Period
2600

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

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

5250.00

**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 147
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Roy T. Gamble II		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 305 Johns Way		Transaction ID : SA11Ai-CN4314
City Augusta	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) B. Ms. Donna Gann		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 290 Village Parkway		Transaction ID : SA11Ai-CN4449
City North Augusta	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500
Name of Employer Windsor Jewelers	Occupation Sales	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500	

Full Name (Last, First, Middle Initial) C. Mr. Charles B. Ginden		Date of Receipt M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 866 Carlton Ridge		Transaction ID : SA11Ai-CN4425
City Atlanta	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500	

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL 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 26 OF 147
	<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)
Rick W. Allen for Congress

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

Mailing Address 1717 Perkins Mill Road

City Claxton State GA Zip Code 30417

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **310**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11Ai-CN4158

Amount of Each Receipt this Period
10

B. Full Name (Last, First, Middle Initial)
Lee Girardeau

Mailing Address 1717 Perkins Mill Road

City Claxton State GA Zip Code 30417

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **335**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11Ai-CN4444

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Dr. Barry J Goldsmith

Mailing Address 15 Summerville Ln

City Augusta State GA Zip Code 30909

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

Name of Employer West Augusta OBGYN Occupation OBGYN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11Ai-CN4343

Amount of Each Receipt this Period
500

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

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

535.00

**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 147
	<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)
Rick W. Allen for Congress

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

Mailing Address 914 Broad Street

City Augusta State GA Zip Code 30901

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

Name of Employer Ruben's Department Store Occupation EVP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11Ai-CN4228

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mr. J. Dudley Gunn

Mailing Address P.O. Box 69

City Wadley State GA Zip Code 30477

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11Ai-CN4221

Amount of Each Receipt this Period
300

C. Full Name (Last, First, Middle Initial)
Bert Guy

Mailing Address 106 E Weed Street

City St. Marys State GA Zip Code 31558

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

Name of Employer Georiga Republican Party Occupation First Vice-Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11Ai-CN4364

Amount of Each Receipt this Period
500

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

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

1800.00

**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 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Hugh L. Hamilton Jr

Mailing Address 3 Eagleton Ct

City Augusta State GA Zip Code 30909

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

Name of Employer Genesis Health LLC Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11Ai-CN4491

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mrs. Molly A Hargather

Mailing Address 1915 Claremont St

City Atlanta State GA Zip Code 30318

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

Name of Employer Unboundary Occupation Account Assistant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11Ai-CN4468

Amount of Each Receipt this Period
150

C. Full Name (Last, First, Middle Initial)
Sue Harrison

Mailing Address 3700 Baldee Road

City Bartow State GA Zip Code 30413

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11Ai-CN4391

Amount of Each Receipt this Period
500

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

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

1650.00

**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 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Anne Randall Hatcher

Mailing Address 424 Wateroak Ln

City Augusta State GA Zip Code 30907

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2014

Transaction ID : SA11Ai-CN4339

Amount of Each Receipt this Period
 2600

B. Full Name (Last, First, Middle Initial)
Mitchell Headley

Mailing Address 14 Magnolia Drive

City Newnan State GA Zip Code 30263

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

Name of Employer Headley Construction Corp. Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11Ai-CN4262

Amount of Each Receipt this Period
 500

C. Full Name (Last, First, Middle Initial)
Harold Hobbs

Mailing Address 2312 Overton Road

City Augusta State GA Zip Code 30904

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

Name of Employer Brown Radiology Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : SA11Ai-CN4424

Amount of Each Receipt this Period
 250

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 30 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Jerry W. Howington

Mailing Address 2312 Walton Way

City Augusta State GA Zip Code 30904

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

Name of Employer Self Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11Ai-CN4155

Amount of Each Receipt this Period
 500

B. Full Name (Last, First, Middle Initial)
Mr. Dennis H Ingley

Mailing Address 2171 Ga Hwy 13 E

City Vidalia State GA Zip Code 30474

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

Name of Employer Ingley Moore Paradice & Co LLC Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11Ai-CN4357

Amount of Each Receipt this Period
 100

C. Full Name (Last, First, Middle Initial)
William S. Jackson

Mailing Address 1331 Reynolds St

City Augusta State GA Zip Code 30901

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

Name of Employer State of Georgia Occupation Senator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4277

Amount of Each Receipt this Period
 500

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

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

1100.00

**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 147
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. H. Lee Johnson		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address P.O. Box 2627		Transaction ID : SA11Ai-CN4459	
City Statesboro	State GA	Zip Code 30459	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer Northland Communications Corp.	Occupation Cable TV Executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		

Full Name (Last, First, Middle Initial) B. Mr. Ron G. Johnson		Date of Receipt M M / D D / Y Y Y Y 11 / 03 / 2014	
Mailing Address 888 Golf Drive		Transaction ID : SA11Ai-CN4477	
City Swainsboro	State GA	Zip Code 30401	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100	
Name of Employer INVEST Financial Corporation	Occupation Representative		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600		

Full Name (Last, First, Middle Initial) C. Terri Jondahl		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2014	
Mailing Address 6009 Lanier Heights Circle		Transaction ID : SA11Ai-CN4193	
City Buford	State GA	Zip Code 30518	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer CAB Incorporated	Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250		

SUBTOTAL of Receipts This Page (optional).....	600.00
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 32 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andy Kilpatrick

Mailing Address 3113 Washington Rd

City Augusta State GA Zip Code 30907

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11Ai-CN4471

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Vera Kilpatrick

Mailing Address 600 Bourne Place

City Augusta State GA Zip Code 30904

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

Name of Employer Very Vera Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11Ai-CN4470

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Roxanne Kimbell

Mailing Address PO Box 228

City Lyons State GA Zip Code 30436

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11Ai-CN4389

Amount of Each Receipt this Period
150

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

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

650.00

**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 33 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Kyle Kinney

Mailing Address 3552 Carnoustie Drive

City Augusta State GA Zip Code 30907

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

Name of Employer The Foot And Ankle Group Occupation Podiatrist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11Ai-CN4171

Amount of Each Receipt this Period
500

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

Mailing Address 1412 Green Ivy Lane

City Augusta State GA Zip Code 30907

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

Name of Employer Savannah River Remediation LLC Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **398**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : SA11Ai-CN4265

Amount of Each Receipt this Period
199

C. Full Name (Last, First, Middle Initial)
Ken Kummer

Mailing Address 27281 Lakeway Court

City Bonita Springs State FL Zip Code 34134

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

Name of Employer AF Inc. Occupation Mfg

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11Ai-CN4393

Amount of Each Receipt this Period
250

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

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

949.00

**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 147
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) Adam Lane		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 389 West Meadowlake Parkway		Transaction ID : SA11Ai-CN4461
City Swainsboro	State GA Zip Code 30401	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Self	Occupation Farmer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) Donald M. Leebern Jr.		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address PO Box 308		Transaction ID : SA11Ai-CN4390
City McDonough	State GA Zip Code 30243	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000
Name of Employer Georgia Crown	Occupation Chairman	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary 2014 Debt	Election Cycle-to-Date 4600	

Full Name (Last, First, Middle Initial) Francois Paul Leger		Date of Receipt M M / D D / Y Y Y Y 10 / 19 / 2014
Mailing Address 478 Front St		Transaction ID : SA11Ai-CN4177
City North Augusta	State SC Zip Code 29841	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer FPL Food LLC	Occupation CEO President	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4100	

SUBTOTAL of Receipts This Page (optional).....	3500.00
TOTAL 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 35 OF 147
	<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)
Rick W. Allen for Congress

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

Mailing Address 113 Arwright Landing

City Macon State GA Zip Code 31210

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

Name of Employer Georgia Mining Association Occupation Executive Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11Ai-CN4267

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Linda B. Lindley

Mailing Address 2913 Stratford Drive

City Augusta State GA Zip Code 30909

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 19 / 2014

Transaction ID : SA11Ai-CN4541

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Joella Mach

Mailing Address P.O. Box 130630

City Houston State TX Zip Code 77219

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11Ai-CN4266

Amount of Each Receipt this Period
2000

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 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Harold L. Machen

Mailing Address 310 Marshy Pointe

City Duluth State GA Zip Code 30097

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

Name of Employer Henderson Electric Occupation Contractor

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 19 / 2014

Transaction ID : SA11Ai-CN4543

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Ms. Meredith E. Magnus

Mailing Address 136 Country Walk Circle

City Brunswick State GA Zip Code 31525

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4285

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Joe Marchese

Mailing Address 45 Columbia Drive Suite #100-A

City Pooler State GA Zip Code 31322

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

Name of Employer Joe Marchese Commercial Construction Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11Ai-CN4374

Amount of Each Receipt this Period
250

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 37 OF 147
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Mr. Mark T Maund		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2014	
Mailing Address 2306 William Street		Transaction ID : SA11Ai-CN4248	
City Augusta	State GA	Zip Code 30904	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500	
Name of Employer CTB Wealth Management Services LLC	Occupation Principal		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		

Full Name (Last, First, Middle Initial) B. Dr. Thomas R McArthur		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address 300 Commerce Way		Transaction ID : SA11Ai-CN4489	
City Vidalia	State GA	Zip Code 30474	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000	
Name of Employer Altamaha Animal Clinic	Occupation Veterinarian		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000		

Full Name (Last, First, Middle Initial) C. Samuel G. McCachern		Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2014	
Mailing Address 116 West Gaston Street		Transaction ID : SA11Ai-CN4375	
City Savannah	State GA	Zip Code 31401	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000	
Name of Employer Thomas & Hutton Inc.	Occupation Engineer		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL 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: (check only one)	PAGE 38 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Ben McElreath

Mailing Address 51 Conifer Cir

City Augusta State GA Zip Code 30909

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

Name of Employer Benjamin F. McElreath PC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2250**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11Ai-CN4307

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. Ben McElreath

Mailing Address 51 Conifer Cir

City Augusta State GA Zip Code 30909

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

Name of Employer Benjamin F. McElreath PC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11Ai-CN4469

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. Gene McManus

Mailing Address 2642 Hillcrest Ave

City Augusta State GA Zip Code 30904

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

Name of Employer AP Wealth Management LLC Occupation Financial

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 17 / 2014

Transaction ID : SA11Ai-CN4535

Amount of Each Receipt this Period
250

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL 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 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Larry Miller

Mailing Address 261 Willowood Court

City Augusta State GA Zip Code 30907

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

Name of Employer Larry Miller Realty Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11Ai-CN4157

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
James F. Mills

Mailing Address 3219 Lake Forest Dr

City Augusta State GA Zip Code 30909

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11Ai-CN4188

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. Victor J Mills

Mailing Address 736 Jones Creek

City Evans State GA Zip Code 30809

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

Name of Employer Blanchard & Calhoun Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4278

Amount of Each Receipt this Period
1000

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 40 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Diane Morgan

Mailing Address 756 Riverbluff Rd

City North Augusta State SC Zip Code 29841

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

Name of Employer R. W. Allen LLC Occupation Executive Assistant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4293

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Ms. Elizabeth S. Morgan

Mailing Address 3 Somerset Ct

City Augusta State GA Zip Code 30909

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

Name of Employer Self Occupation Medical Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11Ai-CN4417

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Mr. Ben B. Neely

Mailing Address P.O. Box 626

City Lyons State GA Zip Code 30436

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4315

Amount of Each Receipt this Period
300

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

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

400.00

**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 147
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Ed Nelson		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address P.O. Box 9		Transaction ID : SA11Ai-CN4465	
City Glennville	State GA	Zip Code 30427	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000	
Name of Employer Rotary Corporation	Occupation President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

Full Name (Last, First, Middle Initial) B. Martin W. Nesmith		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 4400 Perry Road		Transaction ID : SA11Ai-CN4421	
City Claxton	State GA	Zip Code 30417	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer Nesmith Chevrolet	Occupation Dealer		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

Full Name (Last, First, Middle Initial) C. Jean S. Nix		Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2014	
Mailing Address 40 Jones Mill Drive		Transaction ID : SA11Ai-CN4178	
City Carrollton	State GA	Zip Code 30116	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer Nix Fowler Constructors	Occupation Owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750		

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL 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: (check only one)	PAGE 42 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
J. Christopher Noah Sr

Mailing Address 528 McKinnie's Line

City: Evans State: GA Zip Code: 30809

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

Name of Employer: None Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 10 / 24 / 2014

Transaction ID : SA11Ai-CN4288

Amount of Each Receipt this Period: 500

B. Full Name (Last, First, Middle Initial)
Mr. Joseph A. Norman Jr

Mailing Address 3126 Montpelier Dr

City: Augusta State: GA Zip Code: 30909

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

Name of Employer: GIW Occupation: CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250

Date of Receipt: 10 / 21 / 2014

Transaction ID : SA11Ai-CN4218

Amount of Each Receipt this Period: 250

C. Full Name (Last, First, Middle Initial)
McKee Nunnally

Mailing Address 3180 Arden Road

City: Atlanta State: GA Zip Code: 30305

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

Name of Employer: None Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 10 / 22 / 2014

Transaction ID : SA11Ai-CN4260

Amount of Each Receipt this Period: 500

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 147
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) Whitney O'Keeffe		Date of Receipt M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 1002 Katherine Street No. 9		Transaction ID : SA11Ai-CN4154
City Augusta	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600	

Full Name (Last, First, Middle Initial) R. Glen Owen		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 3417 Woodstone Place		Transaction ID : SA11Ai-CN4437
City Augusta	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Self	Occupation Physician	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100	

Full Name (Last, First, Middle Initial) Karl Owens		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 100 SW Main Street		Transaction ID : SA11Ai-CN4316
City Vidalia	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Owens Construction	Occupation President	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL 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 44 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
J C Palmer

Mailing Address 705 Woodvalley Rd

City: Waynesboro State: GA Zip Code: 30830

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

Name of Employer: 1st National Bank Waynesboro GA Occupation: President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **1500**

Date of Receipt: 11 / 04 / 2014

Transaction ID : SA11Ai-CN4475

Amount of Each Receipt this Period: **500**

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

Mailing Address 4400 Perry Road

City: Claxton State: GA Zip Code: 30417

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

Name of Employer: Claxton Bakery Occupation: President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: 11 / 04 / 2014

Transaction ID : SA11Ai-CN4462

Amount of Each Receipt this Period: **500**

C. Full Name (Last, First, Middle Initial)
Toni Peacock

Mailing Address 506 Regent Pl

City: Augusta State: GA Zip Code: 30909

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

Name of Employer: None Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **350**

Date of Receipt: 11 / 04 / 2014

Transaction ID : SA11Ai-CN4473

Amount of Each Receipt this Period: **100**

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

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

1100.00

**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 147	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

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

Mailing Address 2356 Middleground Road

City Statesboro State GA Zip Code 30461

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

Name of Employer Pope Construction Company Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11Ai-CN4369

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mr. Phillip L Proctor

Mailing Address 3532 Granite Way

City Augusta State GA Zip Code 30907

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

Name of Employer Criterium Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1100**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11Ai-CN4299

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Mr. Robert Rahaim

Mailing Address 2115 Glenn Fls

City Grovetown State GA Zip Code 30813

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11Ai-CN4380

Amount of Each Receipt this Period
60

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

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

1160.00

**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 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Todd Alan Reach

Mailing Address 6932 Eldridge Street

City San Diego State CA Zip Code 92120

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

Name of Employer KAB Laboratories Inc. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

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

Transaction ID : SA11Ai-CN4441

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
T R Reddy

Mailing Address 3539 Westlake Dr

City Augusta State GA Zip Code 30907

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

Name of Employer Powerline Inc. Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 19 / 2014

Transaction ID : SA11Ai-CN4176

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Mr. Tim H Reeve

Mailing Address 493 Falcon Dr

City Martinez State GA Zip Code 30907

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

Name of Employer Lakeside High School Occupation Assistant Principal

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date **520**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 14 / 2014

Transaction ID : SA11Ai-CN4534

Amount of Each Receipt this Period
520

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

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

2520.00

**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 47 OF 147
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Lois R. Regan		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address 4189 Crosstowne Ct		Transaction ID : SA11Ai-CN4291	
City Evans	State GA	Zip Code 30809	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000	
Name of Employer None	Occupation Homemaker		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

Full Name (Last, First, Middle Initial) B. Jennifer Reynolds		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 5 Reid Court		Transaction ID : SA11Ai-CN4383	
City Augusta	State GA	Zip Code 30909	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer The Boardroom	Occupation Owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250		

Full Name (Last, First, Middle Initial) C. Mr. Robert P. Richards		Date of Receipt M M / D D / Y Y Y Y 11 / 10 / 2014	
Mailing Address 4 Bent Tree Ct		Transaction ID : SA11Ai-CN4512	
City Augusta	State GA	Zip Code 30909	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500	
Name of Employer Bob Richards Auto Group	Occupation Auto Dealer		
Receipt For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Election Cycle-to-Date 500		

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL 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 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Roy Richards Jr

Mailing Address P.O. Box 800

City: Carrollton State: GA Zip Code: 30112

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

Name of Employer: None Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 10 / 31 / 2014

Transaction ID : SA11Ai-CN4407

Amount of Each Receipt this Period: 1000

B. Full Name (Last, First, Middle Initial)
Gary L. Richardson

Mailing Address 995 Windmill Lane

City: Evans State: GA Zip Code: 30809

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

Name of Employer: Information Requested Occupation: Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250

Date of Receipt: 10 / 24 / 2014

Transaction ID : SA11Ai-CN4308

Amount of Each Receipt this Period: 250

C. Full Name (Last, First, Middle Initial)
John W. Robinson Jr

Mailing Address P.O. Box E

City: Winder State: GA Zip Code: 30680

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

Name of Employer: None Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 10 / 27 / 2014

Transaction ID : SA11Ai-CN4365

Amount of Each Receipt this Period: 500

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 49 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Charlton Rogers

Mailing Address P.O. Box 941

City State Zip Code
Glennville GA 30427

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

Name of Employer Occupation
Self-Employed Sells Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11Ai-CN4466

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Paul Rosenzweig Jr

Mailing Address 3532 Pebble Beach Drive

City State Zip Code
Augusta GA 30907

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

Name of Employer Occupation
Agricommodities Inc. Wholesale

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11Ai-CN4304

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
W. Greg Ryberg

Mailing Address Post Office Box 1077

City State Zip Code
Aiken SC 29802

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11Ai-CN4290

Amount of Each Receipt this Period
500

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Harvey J. Sanders III

Mailing Address 605 Scotts Way

City Augusta State GA Zip Code 30909

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

Name of Employer Serotta Maddocks Evans Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11Ai-CN4275

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Mr. Jimmy Sands

Mailing Address 716 Main St W

City Claxton State GA Zip Code 30417

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

Name of Employer Southern Property Services Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11Ai-CN4463

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Judy S. Sechrist

Mailing Address 1106 Johns Rd

City Augusta State GA Zip Code 30904

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11Ai-CN4245

Amount of Each Receipt this Period
1000

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

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

1550.00

**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 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Abram J Serotta

Mailing Address 701 Greene St

City Augusta State GA Zip Code 30901

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

Name of Employer SME CPA Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3100**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11Ai-CN4223

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. Scott Shepherd

Mailing Address 1353 Story Mill Road

City Waynesboro State GA Zip Code 30830

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

Name of Employer Joseph S. Shepherd Company Occupation Cotton Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11Ai-CN4457

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Mr. Stephen B. Shepherd

Mailing Address 1800 Briarcliff Road

City Atlanta State GA Zip Code 30329

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

Name of Employer Plant Improvement Co. Inc. Occupation Corporate Officer

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 10 / 2014

Transaction ID : SA11Ai-CN4509

Amount of Each Receipt this Period
250

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

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

850.00

**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 52 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Leroy H Simkins Jr

Mailing Address 7 Indian Creek Rd

City Augusta State GA Zip Code 30909

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

Name of Employer Simkins Land Co. Occupation Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2250**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11Ai-CN4472

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. Paul S Simon

Mailing Address 14 Highgate St W

City Augusta State GA Zip Code 30909

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

Name of Employer Morris Communications Corp Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4850**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11Ai-CN4292

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Mr. Preston E. Sizemore

Mailing Address 3106 Natalie Circle

City Augusta State GA Zip Code 30909

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

Name of Employer Sizemore Inc. Occupation President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 18 / 2014

Transaction ID : SA11Ai-CN4175

Amount of Each Receipt this Period
100

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

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

2950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Becky H Smith

Mailing Address 814 Milledge Rd

City Augusta State GA Zip Code 30904

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11Ai-CN4213

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
Mr. John Sours

Mailing Address 2558 Oakwood Trace SE

City Smyrna State GA Zip Code 30080

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

Name of Employer State Of Georgia Occupation Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11Ai-CN4358

Amount of Each Receipt this Period
 100

C. Full Name (Last, First, Middle Initial)
Mr. John Sours

Mailing Address 2558 Oakwood Trace SE

City Smyrna State GA Zip Code 30080

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

Name of Employer State Of Georgia Occupation Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11Ai-CN4436

Amount of Each Receipt this Period
 100

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

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

300.00

**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 54 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. John T. South III

Mailing Address 2 Pettigrew Plantation Road

City Bluffton	State SC	Zip Code 29910
------------------	-------------	-------------------

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

Name of Employer South University	Occupation Educator
--------------------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2014

Transaction ID : SA11Ai-CN4496

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. William J. Stembler

Mailing Address 50 Cinema Lane

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

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

Name of Employer Georgia Theatre Company	Occupation President
---	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2014

Transaction ID : SA11Ai-CN4362

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Barry L. Storey

Mailing Address 1190 Interstate Pkwy

City Augusta	State GA	Zip Code 30909
-----------------	-------------	-------------------

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

Name of Employer Hull Storey Gibson Companies LLC.	Occupation Co-Owner
---	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		20		2014

Transaction ID : SA11Ai-CN4202

Amount of Each Receipt this Period
1000

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 55 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Larson C. Strange

Mailing Address 4085 Oak Park Highway

City Lyons State GA Zip Code 30436

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4313

Amount of Each Receipt this Period
 200

B. Full Name (Last, First, Middle Initial)
Betty Surrency

Mailing Address 604 Cavanaugh Way

City Evans State GA Zip Code 30809

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

Name of Employer Meyobhm Realtors LLC Occupation Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1525**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11Ai-CN4433

Amount of Each Receipt this Period
 25

C. Full Name (Last, First, Middle Initial)
Carey Tankersley

Mailing Address PO Box 211515

City Martinez State GA Zip Code 30917

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

Name of Employer State Farm Insurance Occupation Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11Ai-CN4227

Amount of Each Receipt this Period
 1000

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

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

1225.00

**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 56 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Ben J. Tarbutton Jr

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 Transportation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11Ai-CN4406

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Sidney H. Theus

Mailing Address 2981 Grey Moss Pass

City Duluth State GA Zip Code 30097

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

Name of Employer American Painting And Renovation Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11Ai-CN4225

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Sidney H. Theus

Mailing Address 2981 Grey Moss Pass

City Duluth State GA Zip Code 30097

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

Name of Employer American Painting And Renovation Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11Ai-CN4226

Amount of Each Receipt this Period
250

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 57 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Brinsley T. Thigpen

Mailing Address 5 Raintree Place

City Augusta State GA Zip Code 30909

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

Name of Employer Augusta Sports Council Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11Ai-CN4416

Amount of Each Receipt this Period
 _____ 50

B. Full Name (Last, First, Middle Initial)
Mr. Barney B. Thompson

Mailing Address 3039 Fox Spring Road

City Augusta State GA Zip Code 30909

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

Name of Employer Regions Bank Occupation VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11Ai-CN4170

Amount of Each Receipt this Period
 _____ 250

C. Full Name (Last, First, Middle Initial)
Hiram Thompson

Mailing Address 1019 Emerald PI

City Evans State GA Zip Code 30809

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

Name of Employer Thompson Wrecking Company Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2950**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11Ai-CN4187

Amount of Each Receipt this Period
 _____ 100

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

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

_____ 400.00

**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 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Tattnall Thompson

Mailing Address 17 Huntington Pl

City State Zip Code
Waynesboro GA 30830

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

Name of Employer Occupation
Augusta First Bank & Trust Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11Ai-CN4296

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
B J Tompkins Sr

Mailing Address PO Box 3946

City State Zip Code
Augusta GA 30914

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

Name of Employer Occupation
The Tompkins Company Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11Ai-CN4415

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Ross Trulock

Mailing Address 2633 Raymond Avenue

City State Zip Code
Augusta GA 30904

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

Name of Employer Occupation
Blanchard & Calhoun Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11Ai-CN4249

Amount of Each Receipt this Period
250

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

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

850.00

**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 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Manuel Vallarino

Mailing Address 126 Wofford Road

City Myrtle Beach State SC Zip Code 29575

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

Name of Employer Coquina Sand & Fill Occupation Civil Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11Ai-CN4381

Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
Mr. Kenneth D Varnadore

Mailing Address 2987 Ray Owens Rd

City Appling State GA Zip Code 30802

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

Name of Employer A.B. Beverage Occupation General Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11Ai-CN4246

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
Ms. Whitney F. Walker

Mailing Address 918 Johns Road

City Augusta State GA Zip Code 30904

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11Ai-CN4219

Amount of Each Receipt this Period
 500

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Deena L. Wall

Mailing Address 3825 Inverness Way

City State Zip Code
Martinez GA 30907

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

Name of Employer Occupation
None Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4309

Amount of Each Receipt this Period
300

B. Full Name (Last, First, Middle Initial)
Mr. Clay Ward

Mailing Address 445 Walker Street

City State Zip Code
Augusta GA 30901

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

Name of Employer Occupation
Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11Ai-CN4186

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Mr. R. Daniel Weigle

Mailing Address 1 Summitt PI

City State Zip Code
Augusta GA 30909

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

Name of Employer Occupation
Self Investments

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4298

Amount of Each Receipt this Period
100

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

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

500.00

**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 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
David Wells

Mailing Address 250 Wagon Road

City State Zip Code
Sylvania GA 30467

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

Name of Employer Occupation
Medicap Pharmacy Pharmacist/Owner

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
11 / 10 / 2014

Transaction ID : SA11Ai-CN4500

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. Alan Whitehouse

Mailing Address 1122 Johns Rd

City State Zip Code
Augusta GA 30904

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

Name of Employer Occupation
Augusta ENT Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

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

Transaction ID : SA11Ai-CN4479

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Dr. Bunny Simon Williams

Mailing Address 5 Indian Creek Rd

City State Zip Code
Augusta GA 30909

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

Name of Employer Occupation
Trinity Hospital Of Augusta Director Bariatric Services

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
11 / 20 / 2014

Transaction ID : SA11Ai-CN4545

Amount of Each Receipt this Period
1000

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 62 OF 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Bruce B Wilson

Mailing Address 1600 Northside Dr NW
Apt 100

City Atlanta State GA Zip Code 30318

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

Name of Employer Wilson Hull & Neal Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1550**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11Ai-CN4355

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
Mr. Bill Woodward

Mailing Address One 10th Street Suite 400
PO Box 2278

City Augusta State GA Zip Code 30903

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

Name of Employer Elliott Davis Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11Ai-CN4435

Amount of Each Receipt this Period
 500

C. Full Name (Last, First, Middle Initial)
John M. Worley Jr

Mailing Address 1143 Putter Path

City Orangeburg State SC Zip Code 29118

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

Name of Employer Zeus Industrial Products Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2014

Transaction ID : SA11Ai-CN4450

Amount of Each Receipt this Period
 2600

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

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

3200.00

**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 147
	<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)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Robert A Yarbrough Jr

Mailing Address 2187 Brooview Dr NW

City Atlanta State GA Zip Code 30318

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

Name of Employer Surety South LLC Occupation Insurance Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11Ai-CN4238

Amount of Each Receipt this Period
 200

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).....

200.00

93639.00

**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 147
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
American Conservative Union PAC

Mailing Address 1007 Cameron Street

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00130658

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11C-CN4371

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Associated Builders & Contractors PAC

Mailing Address 440 First Street NW
2nd Floor

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11C-CN4386

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Blessings of Liberty PAC - BOLPAC

Mailing Address c/o 8001 Irvine Center Drive #400

City State Zip Code
Irvine CA 92618

FEC ID number of contributing federal political committee. **C** C00564658

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11C-CN4231

Amount of Each Receipt this Period
2000

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

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

4750.00

**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 147
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Committee to Elect George DeLoach

Mailing Address 201 Oak Lane

City State Zip Code
Waynesboro GA 30830

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11C-CN4400

Amount of Each Receipt this Period
1000

NOTE: FROM PERMISSIBLE FUNDS

B. Full Name (Last, First, Middle Initial)
Cracker Barrel PAC

Mailing Address P.O. Box 787

City State Zip Code
Lebanon TN 37088

FEC ID number of contributing federal political committee. **C** C00252791

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11C-CN4546

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Ernst & Young Political Action Committee

Mailing Address 1101 New York Avenue NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date
5000

Date of Receipt
M M / D D / Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11C-CN4550

Amount of Each Receipt this Period
5000

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

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

7000.00

**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 147
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
ExxonMobil PAC

Mailing Address 5959 Las Colinas Boulevard

City Irving State TX Zip Code 75039

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2014

Transaction ID : SA11C-CN4562

Amount of Each Receipt this Period
 2500

B. Full Name (Last, First, Middle Initial)
Fluor Corporation Political Action Committee

Mailing Address 403 East Capitol Street

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00034132

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2014

Transaction ID : SA11C-CN4561

Amount of Each Receipt this Period
 2500

C. Full Name (Last, First, Middle Initial)
Fund for America's Future

Mailing Address P.O. Box 1373

City Columbia State SC Zip Code 29202

FEC ID number of contributing federal political committee. **C** C00388934

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11C-CN4317

Amount of Each Receipt this Period
 1000

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

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

6000.00

**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 147
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. General Electric Political Action Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address 1299 Pennsylvania Avenue NW
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C C00024869**
 Name of Employer Occupation
 Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 24 / 2014
Transaction ID : SA11C-CN4559
 Amount of Each Receipt this Period
 1000

B. Honeywell International PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Constitution Avenue NW Ste 500 W
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C C00096156**
 Name of Employer Occupation
 Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 24 / 2014
Transaction ID : SA11C-CN4560
 Amount of Each Receipt this Period
 2000

C. ICE PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 9158 E Staring Lane
 City Eden Prairie State MN Zip Code 55347
 FEC ID number of contributing federal political committee. **C C00484667**
 Name of Employer Occupation
 Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 19 / 2014
Transaction ID : SA11C-CN4544
 Amount of Each Receipt this Period
 1000

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

4000.00

**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 68 OF 147
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. Jackson for Senate
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 528

City Appling	State GA	Zip Code 30802
-----------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11C-CN4279

Amount of Each Receipt this Period
1000

NOTE: FROM PERMISSIBLE FUNDS

B. Kevin McCarthy For Congress
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 12667

City Bakersfield	State CA	Zip Code 93389
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00420935**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11C-CN4467

Amount of Each Receipt this Period
2000

C. LYNN PAC
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 1872

City Topeka	State KS	Zip Code 66601
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00491043**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11C-CN4280

Amount of Each Receipt this Period
1000

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

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

4000.00

**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 147
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
National Pro-Life Alliance PAC

Mailing Address 4521 Windsor Arms Court

City Annandale State VA Zip Code 22003

FEC ID number of contributing federal political committee. **C** C00358051

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11C-CN4387

Amount of Each Receipt this Period
 3500

B. Full Name (Last, First, Middle Initial)
New PAC

Mailing Address P.O. Box 7480

City Visalia State CA Zip Code 93290

FEC ID number of contributing federal political committee. **C** C00398750

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11C-CN4385

Amount of Each Receipt this Period
 2000

C. Full Name (Last, First, Middle Initial)
Pioneer Political Action Committee

Mailing Address 701 18th Street NW
Suite 500

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00325357

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11C-CN4373

Amount of Each Receipt this Period
 2500

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

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

8000.00

**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 147
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Speak Up America PAC

Mailing Address **PO Box 2485**

City **Springfield** State **VA** Zip Code **22152**

FEC ID number of contributing federal political committee. **C C00376756**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11C-CN4401

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
The Loose Group

Mailing Address **3379 Peachtree Road Suite 270**

City **Atlanta** State **GA** Zip Code **30326**

FEC ID number of contributing federal political committee. **C C00010793**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11C-CN4234

Amount of Each Receipt this Period
5000

C. Full Name (Last, First, Middle Initial)
The National Right To Work Committee PAC

Mailing Address **8001 Braddock Road Ste 500**

City **Springfield** State **VA** Zip Code **22151**

FEC ID number of contributing federal political committee. **C C00395533**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11C-CN4372

Amount of Each Receipt this Period
1000

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

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

7000.00

**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 71 OF 147
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. Troutman Sanders LLP Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 600 Peachtree Street NE
Suite 5200

City Atlanta State GA Zip Code 30308

FEC ID number of contributing federal political committee. **C** C00311142

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2014

Transaction ID : SA11C-CN4547

Amount of Each Receipt this Period
 1000

B. Tyler Harper For Georgia

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 798

City Ocilla State GA Zip Code 31774

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

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date 500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2014

Transaction ID : SA11C-CN4558

Amount of Each Receipt this Period
 500

C. Voice For Freedom PAC

Full Name (Last, First, Middle Initial)
Mailing Address 2700 Cumberland Pkwy
Suite 150

City Atlanta State GA Zip Code 30339

FEC ID number of contributing federal political committee. **C** C00409805

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Primary 2014 Debt

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2014

Transaction ID : SA11C-CN4548

Amount of Each Receipt this Period
 1000

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 147
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Walters for Congress

Mailing Address 8001 Irvine Center Drive #400

City Irvine State CA Zip Code 92618

FEC ID number of contributing federal political committee. **C** C00546853

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11C-CN4230

Amount of Each Receipt this Period
 2000

B. Full Name (Last, First, Middle Initial)
Westinghouse Electric Company PAC

Mailing Address 900 19th Street NW
Suite 350

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00346361

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2014

Transaction ID : SA11C-CN4549

Amount of Each Receipt this Period
 2000

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).....

4000.00

47250.00

**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 73 OF 147
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial)
Richard W Allen

Mailing Address 2237 Pickens Rd

City Augusta State GA Zip Code 30904

FEC ID number of contributing federal political committee. **C H2GA12121**

Name of Employer RW Allen And Associates Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
440433.77

Date of Receipt
 M M / D D / Y Y Y Y
11 / 24 / 2014

Transaction ID : SA11D-CN4555

Amount of Each Receipt this Period
440433.77

Conversion of Loan to Contribution

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

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

Amount of Each Receipt this Period

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

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

440433.77

440433.77

**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 74 OF 147
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) Richard Allen		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2014	
Mailing Address 2237 Pickens Rd		Transaction ID : SA13a-LN1018	
City Augusta	State GA	Zip Code 30904	
FEC ID number of contributing federal political committee. C H2GA12121		Amount of Each Receipt this Period 110000 Personal Funds	
Name of Employer Self	Occupation Candidate		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 110000		

Full Name (Last, First, Middle Initial) Richard Allen		Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2014	
Mailing Address 2237 Pickens Rd		Transaction ID : SA13a-LN1019	
City Augusta	State GA	Zip Code 30904	
FEC ID number of contributing federal political committee. C H2GA12121		Amount of Each Receipt this Period 160000 Personal Funds	
Name of Employer Self	Occupation Candidate		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 160000		

Full Name (Last, First, Middle Initial) Richard Allen		Date of Receipt M M / D D / Y Y Y Y 11 / 25 / 2014	
Mailing Address 2237 Pickens Rd		Transaction ID : SA13a-LN1020	
City Augusta	State GA	Zip Code 30904	
FEC ID number of contributing federal political committee. C H2GA12121		Amount of Each Receipt this Period 125000 Personal Funds	
Name of Employer Self	Occupation Candidate		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 125000		

SUBTOTAL of Receipts This Page (optional).....	395000.00
TOTAL This Period (last page this line number only).....	395000.00

**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 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Georgia Bank & Trust			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address PO Box 15387			Amount of Each Disbursement this Period 136.65
City Augusta	State GA	Zip Code 30919	Transaction ID : SB17-EX3907
Purpose of Disbursement Analysis Fee		Category/ Type 001	
Candidate Name			Analysis Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Trail Blazer Campaign Services Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 620 Mendelssohn Avenue N Suite 186			Amount of Each Disbursement this Period 1747.00
City Golden Valley	State MN	Zip Code 55427	Transaction ID : SB17-EX3866
Purpose of Disbursement Reporting Software		Category/ Type 001	
Candidate Name			Reporting Software
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Lauren Swing			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 807 Saint Andrews Drive			Amount of Each Disbursement this Period 1791.41
City Augusta	State GA	Zip Code 30909	Transaction ID : SB17-EX3875
Purpose of Disbursement Net Salary		Category/ Type 001	
Candidate Name			Net Salary
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	3675.06
TOTAL 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 76 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Lauren Swing		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2014
Mailing Address 807 Saint Andrews Drive		Amount of Each Disbursement this Period 426.73
City Augusta	State GA	Zip Code 30909
Purpose of Disbursement Reimbursement: See Below	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3924
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	
State: District:	Reimbursement: See Below	

Full Name (Last, First, Middle Initial) B. Deano's Italian Grill		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2014
Mailing Address 110 W. Jackson Street		Amount of Each Disbursement this Period 293.72
City Dublin	State GA	Zip Code 31021
Purpose of Disbursement Bus Tour Food	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3925
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	
State: District:	[MEMO ITEM] Bus Tour Food	

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2014
Mailing Address 1117 Knox Ave		Amount of Each Disbursement this Period 15.43
City North Augusta	State SC	Zip Code 29841
Purpose of Disbursement Office Supplies	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3926
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	
State: District:	[MEMO ITEM] Office Supplies	

SUBTOTAL of Disbursements This Page (optional).....	426.73
TOTAL 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 77 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Publix		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2014
Mailing Address 2816 Washington Rd		Amount of Each Disbursement this Period 35.63
City Augusta	State GA	Zip Code 30909
Purpose of Disbursement Event Catering	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX3927	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	
State: District:	[MEMO ITEM] Event Catering	

Full Name (Last, First, Middle Initial) B. Lauren Swing		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 807 Saint Andrews Drive		Amount of Each Disbursement this Period 1791.41
City Augusta	State GA	Zip Code 30909
Purpose of Disbursement Net Salary	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX3938	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	
State: District:	Net Salary	

Full Name (Last, First, Middle Initial) c. Diane Morgan		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 756 Riverbluff Road		Amount of Each Disbursement this Period 566.37
City North Augusta	State SC	Zip Code 29841
Purpose of Disbursement Net Salary	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX3870	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Net Salary	

SUBTOTAL of Disbursements This Page (optional).....	2357.78
TOTAL 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 78 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Diane Morgan		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 756 Riverbluff Road		Amount of Each Disbursement this Period 102.77
City North Augusta	State SC Zip Code 29841	
Purpose of Disbursement Reimbursement: See Below	Category/Type 001	Transaction ID : SB17-EX3921
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Reimbursement: See Below
State: District:		

Full Name (Last, First, Middle Initial) B. Walmart		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 1201 Knox Ave		Amount of Each Disbursement this Period 12.77
City North Augusta	State SC Zip Code 29841	
Purpose of Disbursement Event Supplies	Category/Type 001	Transaction ID : SB17-EX3922
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	[MEMO ITEM] Event Supplies
State: District:		

Full Name (Last, First, Middle Initial) c. Diane Morgan		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 756 Riverbluff Road		Amount of Each Disbursement this Period 90.00
City North Augusta	State SC Zip Code 29841	
Purpose of Disbursement Cash for Deputy duty on Election Night	Category/Type 001	Transaction ID : SB17-EX3923
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	[MEMO ITEM] Cash for Deputy duty on Election Night
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	102.77
TOTAL 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 79 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Diane Morgan		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 756 Riverbluff Road		Amount of Each Disbursement this Period 566.36
City North Augusta	State SC	Zip Code 29841
Purpose of Disbursement Net Salary	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX3933	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 101.79
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX3839	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) c. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 163.88
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX3840	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	832.03
TOTAL 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 80 OF 147	
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 57.52
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3842
Purpose of Disbursement Credit Card Service Fee		Category/Type 001	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 58.94
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3843
Purpose of Disbursement Credit Card Service Fee		Category/Type 001	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) c. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 71.31
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3844
Purpose of Disbursement Credit Card Service Fee		Category/Type 001	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	187.77
TOTAL 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 81 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 66.99
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3845
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 15.36
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3846
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 225.71
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3847
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	308.06
TOTAL 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 82 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 371.17
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX3858
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 81.09
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX3859
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 46.01
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX3860
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	498.27
TOTAL 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 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 98.05
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3861
Purpose of Disbursement Credit Card Service Fee		Category/Type 001	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 47.44
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3911
Purpose of Disbursement Credit Card Service Fee		Category/Type 001	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) c. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 31.64
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3862
Purpose of Disbursement Credit Card Service Fee		Category/Type 001	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	177.13
TOTAL 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 147	
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 75.33
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3912
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 79.07
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3863
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) c. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 29.00
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement Chargeback Fee	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3867
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Chargeback Fee
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	183.40
TOTAL 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 85 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 359.38
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3913
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 25.82
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3908
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 228.87
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3910
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	
Candidate Name			Credit Card Service Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	614.07
TOTAL 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 86 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 95.26	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3914	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 311.95	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3915	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 94.88	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3917	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Credit Card Service Fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	466.09
TOTAL 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 87 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 4.32
City San Francisco	State CA	Zip Code 94105	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Transaction ID : SB17-EX3918
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Credit Card Service Fee
State: District:			

Full Name (Last, First, Middle Initial) B. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 31.63
City San Francisco	State CA	Zip Code 94105	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Transaction ID : SB17-EX3920
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Credit Card Service Fee
State: District:			

Full Name (Last, First, Middle Initial) c. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 143.80
City San Francisco	State CA	Zip Code 94105	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Transaction ID : SB17-EX3946
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt		Credit Card Service Fee
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	179.75
TOTAL 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 88 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 33.07
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX3947	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 34.53
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX3949	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2014
Mailing Address IRS Payment Center		Amount of Each Disbursement this Period 5109.72
City Ogden	State UT	Zip Code 84201
Purpose of Disbursement Tax Payment	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX3944	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Tax Payment
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5177.32
TOTAL 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 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address PO Box 1005184		Amount of Each Disbursement this Period 273.54
City Atlanta	State GA	Zip Code 30348
Purpose of Disbursement Telephone & Internet Service	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3854
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Telephone & Internet Service
State: District:		

Full Name (Last, First, Middle Initial) B. GA Department Of Revenue		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 1800 Century Blvd NE		Amount of Each Disbursement this Period 473.45
City Atlanta	State GA	Zip Code 30345
Purpose of Disbursement Tax Payment	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3864
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Tax Payment
State: District:		

Full Name (Last, First, Middle Initial) c. GA Department Of Revenue		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 1800 Century Blvd NE		Amount of Each Disbursement this Period 2527.65
City Atlanta	State GA	Zip Code 30345
Purpose of Disbursement Tax Payment	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3865
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Tax Payment
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3274.64
TOTAL 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 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Thomas Gardner			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 5931 Tubman Rd			Amount of Each Disbursement this Period 350.38
City Appling	State GA	Zip Code 30802	
Purpose of Disbursement Net Salary	Candidate Name		Transaction ID : SB17-EX3869
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/ Type 001		Net Salary

Full Name (Last, First, Middle Initial) B. Thomas Gardner			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 5931 Tubman Rd			Amount of Each Disbursement this Period 350.38
City Appling	State GA	Zip Code 30802	
Purpose of Disbursement Net Salary	Candidate Name		Transaction ID : SB17-EX3932
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt		
State: District:	Category/ Type 001		Net Salary

Full Name (Last, First, Middle Initial) c. Ceteris Inc			Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014
Mailing Address 5909 Peachtree Dunwoody Road Sui			Amount of Each Disbursement this Period 100.00
City Atlanta	State GA	Zip Code 30328	
Purpose of Disbursement Payroll Service	Candidate Name		Transaction ID : SB17-EX3948
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt		
State: District:	Category/ Type 001		Payroll Service

SUBTOTAL of Disbursements This Page (optional).....	800.76
TOTAL 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 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. William Wheat		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address PO Box 944		Amount of Each Disbursement this Period 323.78
City Langley	State SC	Zip Code 29834
Purpose of Disbursement Reimbursement: See Below	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3849
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Reimbursement: See Below	

Full Name (Last, First, Middle Initial) B. William Wheat		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address PO Box 944		Amount of Each Disbursement this Period 165.00
City Langley	State SC	Zip Code 29834
Purpose of Disbursement Mileage	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3850
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Mileage	

Full Name (Last, First, Middle Initial) c. FedEx Office		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 440 Barrett Pkwy		Amount of Each Disbursement this Period 75.59
City Kennesaw	State GA	Zip Code 30144
Purpose of Disbursement Event Supplies	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3851
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Event Supplies	

SUBTOTAL of Disbursements This Page (optional).....	323.78
TOTAL 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 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. FedEx Office		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 440 Barrett Pkwy		Amount of Each Disbursement this Period 43.19
City Kennesaw	State GA	
Zip Code 30144	Purpose of Disbursement Event Supplies	Transaction ID : SB17-EX3853
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Event Supplies
State: District:		

Full Name (Last, First, Middle Initial) B. William Wheat		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address PO Box 944		Amount of Each Disbursement this Period 1148.33
City Langley	State SC	
Zip Code 29834	Purpose of Disbursement Net Salary	Transaction ID : SB17-EX3876
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) c. William Wheat		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address PO Box 944		Amount of Each Disbursement this Period 1148.33
City Langley	State SC	
Zip Code 29834	Purpose of Disbursement Net Salary	Transaction ID : SB17-EX3939
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Net Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2296.66
TOTAL 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 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Push Digital		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2014
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 2980.81
City Columbia	State SC	Zip Code 29202
Purpose of Disbursement Email Marketing	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3940
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	
State: District:	Email Marketing	

Full Name (Last, First, Middle Initial) B. Push Digital		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2014
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 3045.67
City Columbia	State SC	Zip Code 29202
Purpose of Disbursement Email Marketing	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3941
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	
State: District:	Email Marketing	

Full Name (Last, First, Middle Initial) c. Push Digital		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2014
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 2239.61
City Columbia	State SC	Zip Code 29202
Purpose of Disbursement Email Marketing	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3942
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	
State: District:	Email Marketing	

SUBTOTAL of Disbursements This Page (optional).....	8266.09
TOTAL 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 94 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Push Digital		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2014
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 1020.71
City Columbia	State SC	Zip Code 29202
Purpose of Disbursement Email Marketing	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3943
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Rally.org		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 144 2nd St. First Floor		Amount of Each Disbursement this Period 2.86
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement Transaction Fee	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3919
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Card Services Center		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address PO Box 105025		Amount of Each Disbursement this Period 4133.62
City Atlanta	State GA	Zip Code 30348
Purpose of Disbursement Credit Card Paid by Card Services Center	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3906
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	5157.19
TOTAL 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 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Lowe's		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 224 Bobby Jones Expressway		Amount of Each Disbursement this Period 119.52
City Augusta State GA Zip Code 30907	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3881
Candidate Name	Category/Type 001	[MEMO ITEM] Campaign Supplies
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 525 8th St		Amount of Each Disbursement this Period 374.00
City Augusta State GA Zip Code 30901	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3882
Candidate Name	Category/Type 001	[MEMO ITEM] Postage
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 196.00
City Augusta State GA Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3883
Candidate Name	Category/Type 001	[MEMO ITEM] Postage
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL 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 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 465.38
City Augusta	State GA	Zip Code 30909
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3884
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Postage Office Supplies
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Holiday Inn Augusta		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 2155 Gordon Highway		Amount of Each Disbursement this Period 229.00
City Augusta	State GA	Zip Code 30909
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3885
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Meeting Room
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 400.95
City Augusta	State GA	Zip Code 30909
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3886
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Office Supplies
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL 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 97 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 4.83
City Augusta State GA Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3887
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 308.84
City Augusta State GA Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3888
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Toner Cartridges
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 224.00
City Augusta State GA Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3889
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Postage
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL 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 98 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Target		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 235 Robert C Daniel Junior Parkwa		Amount of Each Disbursement this Period 22.43
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3890
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Event Supplies
State: District:		

Full Name (Last, First, Middle Initial) B. Enmark		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 100 Northside Drive W		Amount of Each Disbursement this Period 84.50
City Statesboro	State GA	
Zip Code 30458	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3891
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Fuel
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 89.62
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3892
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Office Supplies
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL 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 99 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 155.00
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3893
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Postage
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 98.00
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3894
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Postage
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 56.91
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3895
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Office Supplies
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL 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 100 OF 147	
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Johnny Harris Restaurant		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 1651 Victory Drive		Amount of Each Disbursement this Period 333.33
City Savannah State GA Zip Code 31404	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3896
Candidate Name	Category/Type 001	[MEMO ITEM] Event Catering
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Walmart		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 1201 Knox Ave		Amount of Each Disbursement this Period 6.46
City North Augusta State SC Zip Code 29841	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3897
Candidate Name	Category/Type 001	[MEMO ITEM] Event Costs
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	
State: District:		

Full Name (Last, First, Middle Initial) c. Party 'N' Dollar		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 592 Bobby Jones Expressway		Amount of Each Disbursement this Period 29.55
City Augusta State GA Zip Code 30907	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3898
Candidate Name	Category/Type 001	[MEMO ITEM] Event Costs
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL 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 147	
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. NationBuilder		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 448 S Hill Street #200		Amount of Each Disbursement this Period 499.00
City Los Angeles	State CA	Zip Code 90013
Purpose of Disbursement Administrative/Salary/Overhead Expenses		001 Category/Type
Candidate Name		Transaction ID : SB17-EX3899
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Campaign Software
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Sunrise Grill		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 3830 Washington Road		Amount of Each Disbursement this Period 83.63
City Martinez	State GA	Zip Code 30907
Purpose of Disbursement Administrative/Salary/Overhead Expenses		001 Category/Type
Candidate Name		Transaction ID : SB17-EX3900
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Event Catering
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Kroger		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 4355 Washington Road		Amount of Each Disbursement this Period 1.34
City Evans	State GA	Zip Code 30809
Purpose of Disbursement Administrative/Salary/Overhead Expenses		001 Category/Type
Candidate Name		Transaction ID : SB17-EX3901
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Event Costs
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL 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 147	
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 12 Ben Carter Road		Amount of Each Disbursement this Period 98.65
City Baxley	State GA Zip Code 31513	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	001	Transaction ID : SB17-EX3902
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Fuel
State: District:		

Full Name (Last, First, Middle Initial) B. Zaxby's		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 2203 Veterans Boulevard		Amount of Each Disbursement this Period 13.26
City Dublin	State GA Zip Code 31021	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	001	Transaction ID : SB17-EX3903
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Travel Meal
State: District:		

Full Name (Last, First, Middle Initial) c. Raceway		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 1236 Gordon Highway		Amount of Each Disbursement this Period 91.85
City Augusta	State GA Zip Code 30901	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	001	Transaction ID : SB17-EX3904
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	[MEMO ITEM] Fuel
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL 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 147	
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Lowe's		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 224 Bobby Jones Expressway		Amount of Each Disbursement this Period 474.45
City Augusta State GA Zip Code 30907	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3905
Candidate Name	Category/Type 001	[MEMO ITEM] Yard Sign Supplies
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	
State: District:		

Full Name (Last, First, Middle Initial) B. Card Services Center		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address PO Box 105025		Amount of Each Disbursement this Period 474.45
City Atlanta State GA Zip Code 30348	Purpose of Disbursement Credit Card Paid by Card Services Center	Transaction ID : SB17-EX3880
Candidate Name	Category/Type 001	Credit Card Paid by Card Services Center
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Luna Restaurant		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 200 Main Street		Amount of Each Disbursement this Period 435.45
City Gainesville State GA Zip Code 30501	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3878
Candidate Name	Category/Type 001	[MEMO ITEM] Event Catering
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	474.45
TOTAL 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 104 OF 147	
	<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)
Rick W. Allen for Congress

A. Card Services Center

Full Name (Last, First, Middle Initial)
Rick W. Allen for Congress

Mailing Address PO Box 105025

City Atlanta State GA Zip Code 30348

Purpose of Disbursement Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) General 2014

State: District:

Date of Disbursement: 10 / 31 / 2014

Amount of Each Disbursement this Period: 39.00

Transaction ID : SB17-EX3879

[MEMO ITEM]
Fee

B. Card Services Center

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 105025

City Atlanta State GA Zip Code 30348

Purpose of Disbursement Credit Card: See Below

Candidate Name

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) General 2014 Debt

State: District:

Date of Disbursement: 11 / 10 / 2014

Amount of Each Disbursement this Period: 448.27

Transaction ID : SB17-EX3945

Credit Card: See Below

c. Office Depot

Full Name (Last, First, Middle Initial)

Mailing Address 3675 Walton Way Extension

City Augusta State GA Zip Code 30909

Purpose of Disbursement Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) General 2014 Debt

State: District:

Date of Disbursement: 11 / 10 / 2014

Amount of Each Disbursement this Period: 57.41

Transaction ID : SB17-EX3973

[MEMO ITEM]
Office Supplies

SUBTOTAL of Disbursements This Page (optional)..... 448.27

TOTAL 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 105 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 18.63
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3974
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	[MEMO ITEM] Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 147.00
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3975
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	[MEMO ITEM] Postage
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 4.85
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3976
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	[MEMO ITEM] Office Supplies
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL 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 106 OF 147			
	<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)
Rick W. Allen for Congress

A. Target

Full Name (Last, First, Middle Initial)
Mailing Address 235 Robert C Daniel Junior Parkwa

City Augusta State GA Zip Code 30909

Purpose of Disbursement Administrative/Salary/Overhead Expenses
Candidate Name

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) General 2014 Debt

State: District:

Date of Disbursement: 11 / 10 / 2014

Amount of Each Disbursement this Period: 15.60

Transaction ID : SB17-EX3977

[MEMO ITEM]
Office Supplies

B. Enmark

Full Name (Last, First, Middle Initial)
Mailing Address 217 US Highway 25 N

City Millen State GA Zip Code 30442

Purpose of Disbursement Administrative/Salary/Overhead Expenses
Candidate Name

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) General 2014 Debt

State: District:

Date of Disbursement: 11 / 10 / 2014

Amount of Each Disbursement this Period: 54.54

Transaction ID : SB17-EX3978

[MEMO ITEM]
Fuel

c. Krispy Kreme Doughnuts

Full Name (Last, First, Middle Initial)
Mailing Address 2866 Washington Road

City Augusta State GA Zip Code 30909

Purpose of Disbursement Administrative/Salary/Overhead Expenses
Candidate Name

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) General 2014 Debt

State: District:

Date of Disbursement: 11 / 10 / 2014

Amount of Each Disbursement this Period: 10.93

Transaction ID : SB17-EX3979

[MEMO ITEM]
Food for Volunteers

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL 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 107 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 3744 Wheeler Road		Amount of Each Disbursement this Period 75.00
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3980
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	[MEMO ITEM] Fuel
State: District:		

Full Name (Last, First, Middle Initial) B. Parker's		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 4412 New Jesup Highway		Amount of Each Disbursement this Period 61.81
City Brunswick	State GA	
Zip Code 31520	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3981
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	[MEMO ITEM] Fuel
State: District:		

Full Name (Last, First, Middle Initial) c. Card Services Center		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address PO Box 105025		Amount of Each Disbursement this Period 2.50
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3982
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	[MEMO ITEM] Fees
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL 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 108 OF 147	
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. The M Group LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 100 Luna Park Drive #156		Amount of Each Disbursement this Period 3269.25
City Alexandria	State VA	Zip Code 22305
Purpose of Disbursement Fundraising Consulting	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3855
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Fundraising Consulting
State: District:		

Full Name (Last, First, Middle Initial) B. Georgia Power Co.		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2014
Mailing Address 96 Annex		Amount of Each Disbursement this Period 234.51
City Atlanta	State GA	Zip Code 30396
Purpose of Disbursement Office Utilities	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3930
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Office Utilities
State: District:		

Full Name (Last, First, Middle Initial) C. Gas South		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address PO Box 530552		Amount of Each Disbursement this Period 52.48
City Atlanta	State GA	Zip Code 30353
Purpose of Disbursement Utilities	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3929
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Utilities
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3556.24
TOTAL 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 109 OF 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Samuel C. Shepherd		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 1353 Story Mill Road		Amount of Each Disbursement this Period 791.58 Transaction ID : SB17-EX3874
City Waynesboro	State GA	
Zip Code 30830	Purpose of Disbursement Net Salary	Net Salary
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Samuel C. Shepherd		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 1353 Story Mill Road		Amount of Each Disbursement this Period 791.58 Transaction ID : SB17-EX3937
City Waynesboro	State GA	
Zip Code 30830	Purpose of Disbursement Net Salary	Net Salary
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	
State: District:		

Full Name (Last, First, Middle Initial) c. Christine Rhodes		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 3103 Natalie Circle		Amount of Each Disbursement this Period 702.39 Transaction ID : SB17-EX3871
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Net Salary	Net Salary
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2285.55
TOTAL 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 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Christine Rhodes		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 3103 Natalie Circle		Amount of Each Disbursement this Period 702.39
City Augusta	State GA	Zip Code 30909
Purpose of Disbursement Net Salary	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX3934	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) B. Strategic Media Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 1911 North Ft. Myer Drive Suite 400		Amount of Each Disbursement this Period 178181.98
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement Media	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX3836	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Media
State: District:		

Full Name (Last, First, Middle Initial) c. Strategic Media Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 1911 North Ft. Myer Drive Suite 400		Amount of Each Disbursement this Period 212510.30
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement Media	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX3848	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Media
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	391394.67
TOTAL 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 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Election Connections Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2014
Mailing Address PO Box 10866		Amount of Each Disbursement this Period 452.90
City Tallahassee	State FL	Zip Code 32302
Purpose of Disbursement Event Turnout Calls	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX3916	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Event Turnout Calls
State: District:		

Full Name (Last, First, Middle Initial) B. Anderson Ferguson		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 2004 Talons Lake Drive		Amount of Each Disbursement this Period 403.39
City Statesboro	State GA	Zip Code 30458
Purpose of Disbursement Net Salary	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX3868	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) c. Anderson Ferguson		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 2004 Talons Lake Drive		Amount of Each Disbursement this Period 403.39
City Statesboro	State GA	Zip Code 30458
Purpose of Disbursement Net Salary	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX3931	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Net Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1259.68
TOTAL 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 147			
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Robert M. Saparow			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 480 Gramercy Drive			Amount of Each Disbursement this Period 1519.06
City Marietta	State GA	Zip Code 30068	Transaction ID : SB17-EX3873
Purpose of Disbursement Net Salary		Category/ Type 001	
Candidate Name			Net Salary
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Robert M. Saparow			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 480 Gramercy Drive			Amount of Each Disbursement this Period 1519.06
City Marietta	State GA	Zip Code 30068	Transaction ID : SB17-EX3936
Purpose of Disbursement Net Salary		Category/ Type 001	
Candidate Name			Net Salary
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Madeline Rogers			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 404 Bloedel Reserve Way			Amount of Each Disbursement this Period 428.00
City Augusta	State GA	Zip Code 30907	Transaction ID : SB17-EX3872
Purpose of Disbursement Net Salary		Category/ Type 001	
Candidate Name			Net Salary
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	3466.12
TOTAL 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 147	
	<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)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Madeline Rogers		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 404 Bloedel Reserve Way		Amount of Each Disbursement this Period 428.00
City Augusta	State GA	Zip Code 30907
Purpose of Disbursement Net Salary	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3935
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	
State: District:	Net Salary	

Full Name (Last, First, Middle Initial) B. Magellan Strategies		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 1685 Boxelder Street Suite 300		Amount of Each Disbursement this Period 2850.00
City Louisville	State CO	Zip Code 80027
Purpose of Disbursement Campaign Survey	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX3877
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Campaign Survey	

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

SUBTOTAL of Disbursements This Page (optional).....	3278.00
TOTAL This Period (last page this line number only).....	441468.33

**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 114 OF 147	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Richard Allen		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 2237 Pickens Rd		Amount of Each Disbursement this Period 64566.23 Transaction ID : SB19A-LP1012
City Augusta	State GA	
Zip Code 30904	Purpose of Disbursement Loan Payment	Category/ Type
Candidate Name Richard Allen	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: GA District: 12	

Full Name (Last, First, Middle Initial) B. Richard Allen		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 2237 Pickens Rd		Amount of Each Disbursement this Period 10433.77 Transaction ID : SB19A-LP1013
City Augusta	State GA	
Zip Code 30904	Purpose of Disbursement Conversion of Loan to Contribution	Category/ Type
Candidate Name Richard Allen	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: GA District: 12	

Full Name (Last, First, Middle Initial) c. Richard Allen		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 2237 Pickens Rd		Amount of Each Disbursement this Period 175000.00 Transaction ID : SB19A-LP1014
City Augusta	State GA	
Zip Code 30904	Purpose of Disbursement Conversion of Loan to Contribution	Category/ Type
Candidate Name Richard Allen	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: GA District: 12	

SUBTOTAL of Disbursements This Page (optional).....	250000.00
TOTAL 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 115 OF 147	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. Richard Allen		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 2237 Pickens Rd		Amount of Each Disbursement this Period 105000.00 Transaction ID : SB19A-LP1015
City Augusta	State GA	
Zip Code 30904	Purpose of Disbursement Conversion of Loan to Contribution	Category/ Type
Candidate Name Richard Allen	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: GA District: 12	

Full Name (Last, First, Middle Initial) B. Richard Allen		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 2237 Pickens Rd		Amount of Each Disbursement this Period 130000.00 Transaction ID : SB19A-LP1016
City Augusta	State GA	
Zip Code 30904	Purpose of Disbursement Conversion of Loan to Contribution	Category/ Type
Candidate Name Richard Allen	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: GA District: 12	

Full Name (Last, First, Middle Initial) c. Richard Allen		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 2237 Pickens Rd		Amount of Each Disbursement this Period 20000.00 Transaction ID : SB19A-LP1017
City Augusta	State GA	
Zip Code 30904	Purpose of Disbursement Conversion of Loan to Contribution	Category/ Type
Candidate Name Richard Allen	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: GA District: 12	

SUBTOTAL of Disbursements This Page (optional).....	255000.00
TOTAL This Period (last page this line number only).....	505000.00

**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 147	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

Full Name (Last, First, Middle Initial) A. ICE PAC		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 9158 E Staring Lane		Amount of Each Disbursement this Period 1000.00
City Eden Prairie	State MN	
Purpose of Disbursement Contribution Refund to MCPC	Zip Code 55347	Transaction ID : SB20c-CR3
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Contribution Refund
State: District:		

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

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

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

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 : SC10-LN1

Rick W. Allen for Congress

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

[PERSONAL FUNDS]

Election: 2012

Richard Allen

Primary
 General
 Other (specify) ▼

Mailing Address
2237 Pickens Rd

City State ZIP Code
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
50000 .00 50000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 10 / D 11 / Y 2011 M 01 / D 08 / Y 2012 0.00 % (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)..... 50000.00
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.

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) **Rick W. Allen for Congress** Transaction ID : **SC10-LN2**

LOAN SOURCE Full Name (Last, First, Middle Initial) Richard Allen	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2237 Pickens Rd		

City	State	ZIP Code
Augusta	GA	30904

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000	.00	30000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 31 / Y 2011	M 01 / D 08 / Y 2013	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	▶	30000.00
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.

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 : SC10-LN3

Rick W. Allen for Congress

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

[PERSONAL FUNDS]

Election: 2012

Richard Allen

Primary
 General
 Other (specify) ▼

Mailing Address
2237 Pickens Rd

City State ZIP Code
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
20000 .00 20000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
03 / 30 / 2012 01 / 08 / 2013 0.00 % (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)..... 20000.00
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.

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) **Rick W. Allen for Congress** Transaction ID : **SC10-LN5**

LOAN SOURCE Full Name (Last, First, Middle Initial) Richard Allen	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2237 Pickens Rd		

City	State	ZIP Code
Augusta	GA	30904

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
150000	.00	150000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 07 / D 11 / Y 2012 Y	M 01 / D 01 / Y 2013 Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	150000.00
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.	

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 : SC10-LN7

Rick W. Allen for Congress

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

[PERSONAL FUNDS]

Election: 2012

Richard Allen

Primary

General

Other (specify) ▼

Mailing Address
2237 Pickens Rd

City State ZIP Code
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
250000 .00 250000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

08

02

2012

01

01

2013

0.00

% (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)..... 250000.00

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.

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 : SC10-LN13

Rick W. Allen for Congress

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

[PERSONAL FUNDS]

Election: 2014

Richard Allen

Primary

General

Other (specify) ▼

Mailing Address
2237 Pickens Rd

City State ZIP Code
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
80000 30000.00 50000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

03

31

2014

01

01

2015

0.00

% (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)..... 50000.00

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.

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 : SC10-LN1013

Rick W. Allen for Congress

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

[PERSONAL FUNDS]

Election: 2014

Richard Allen

Primary
 General
 Other (specify) ▼

Mailing Address
2237 Pickens Rd

City State ZIP Code
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
200000 .00 200000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 04 / D 24 / Y 2014 M 01 / D 01 / Y 2015 0.00 % (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)..... 200000.00
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.

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 : SC10-LN1014

Rick W. Allen for Congress

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

[PERSONAL FUNDS]

Election: 2014

Richard Allen

Primary

General

Other (specify) ▼

Mailing Address
2237 Pickens Rd

City State ZIP Code
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
75000 75000.00 .00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

05

22

2014

01

01

2015

0.00

% (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)..... 0.00

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.

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 : SC10-LN1015

Rick W. Allen for Congress

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

[PERSONAL FUNDS]

Election: 2014

Richard Allen

Primary

General

Other (specify) ▼

Mailing Address
2237 Pickens Rd

City State ZIP Code
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
175000 175000.00 .00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

08

27

2014

01

01

2015

0.00

% (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)..... 0.00

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.

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 : SC10-LN1016

Rick W. Allen for Congress

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

[PERSONAL FUNDS]

Election: 2014

Richard Allen

Primary

General

Other (specify) ▼

Mailing Address
2237 Pickens Rd

City State ZIP Code
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
105000 105000.00 .00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

10

02

2014

01

01

2015

0.00

% (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)..... 0.00

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.

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 : SC10-LN1017

Rick W. Allen for Congress

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

[PERSONAL FUNDS]

Election: 2014

Richard Allen

Primary

General

Other (specify) ▼

Mailing Address
2237 Pickens Rd

City State ZIP Code
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
130000 130000.00 .00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

10 / 10 / 2014

10 / 01 / 2015

01 / 01 / 2015

0.00

% (apr)

Yes No

0.00 % (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)..... 0.00

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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Rick W. Allen for Congress** Transaction ID : **SC10-LN1018**

LOAN SOURCE Full Name (Last, First, Middle Initial) Richard Allen	[PERSONAL FUNDS]	Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2237 Pickens Rd		

City	State	ZIP Code
Augusta	GA	30904

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
110000	20000.00	90000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 10 / D 20 / Y 2014	M 01 / D 01 / Y 2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	90000.00
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.

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 : SC10-LN1019

Rick W. Allen for Congress

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

[PERSONAL FUNDS]

Election: 2014

Richard Allen

Primary

General

Other (specify) ▼

Mailing Address
2237 Pickens Rd

City State ZIP Code
Augusta GA 30904

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
160000 .00 160000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

10

27

2014

01

01

2015

0.00

% (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) 160000.00
TOTALS This Period (last page in this line only) 1000000.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SCM Associates Inc.

Mailing Address PO Box 254

City State Zip Code
 Dublin NH 03444

Nature of Debt (Purpose):
 Invoice: Direct Mail

Outstanding Balance Beginning This Period **Transaction ID : SD9-INV3666**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 131 OF 147
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Black Rock Group LLC	Nature of Debt (Purpose): Invoice: Media Consulting
Mailing Address 66 Canal Center Plaza Suite 555	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>	Transaction ID : SD10-INV3757	
Amount Incurred This Period <input type="text" value="7487.40"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="7487.40"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor DigitalXpress Printing	Nature of Debt (Purpose): Invoice: Invitation Printing
Mailing Address 2211 Beaver Ruin Road Ste 170	
City State Zip Code Norcross GA 30071	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>	Transaction ID : SD10-INV3765	
Amount Incurred This Period <input type="text" value="2901.92"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="2901.92"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor DigitalXpress Printing	Nature of Debt (Purpose): Invoice: Invitation Printing
Mailing Address 2211 Beaver Ruin Road Ste 170	
City State Zip Code Norcross GA 30071	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>	Transaction ID : SD10-INV3766	
Amount Incurred This Period <input type="text" value="727.12"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="727.12"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="11116.44"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor DigitalXpress Printing		Nature of Debt (Purpose): Invoice: Invitation Printing
Mailing Address 2211 Beaver Ruin Road Ste 170		
City State	Zip Code	
Norcross GA	30071	

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3768	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1573.64"/>	<input type="text" value=".00"/>	<input type="text" value="1573.64"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Public Opinion Strategies		Nature of Debt (Purpose): Invoice: Poll
Mailing Address 214 N Fayette St		
City State	Zip Code	
Alexandria VA	22314	

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3792	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="15000.00"/>	<input type="text" value=".00"/>	<input type="text" value="15000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Southern Beverage Outlet		Nature of Debt (Purpose): Invoice: Event Costs
Mailing Address 248 Bobby Jones Expressway		
City State	Zip Code	
Augusta GA	30907	

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3836	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="234.60"/>	<input type="text" value=".00"/>	<input type="text" value="234.60"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="16808.24"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 133 OF 147
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Exxon Mobil	Nature of Debt (Purpose): Invoice: Fuel
Mailing Address 16096 S Highway 11	
City State Zip Code Fair Play SC 29643	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10-INV3837	
Amount Incurred This Period <input type="text" value="2.97"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2.97"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fresh Market	Nature of Debt (Purpose): Invoice: Event Costs
Mailing Address 2701 Washington Road	
City State Zip Code Augusta GA 30909	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10-INV3838	
Amount Incurred This Period <input type="text" value="12.46"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="12.46"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Office Depot	Nature of Debt (Purpose): Invoice: Office Supplies
Mailing Address 3675 Walton Way Extension	
City State Zip Code Augusta GA 30909	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10-INV3839	
Amount Incurred This Period <input type="text" value="166.48"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="166.48"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="181.91"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Office Depot	Nature of Debt (Purpose): Invoice: Office Supplies						
Mailing Address 3675 Walton Way Extension							
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Augusta</td> <td>GA</td> <td>30909</td> </tr> </table>	City	State	Zip Code	Augusta	GA	30909	
City	State	Zip Code					
Augusta	GA	30909					

Outstanding Balance Beginning This Period <input style="width:100%; text-align: right;" type="text" value=".00"/>	Transaction ID : SD10-INV3840						
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">Amount Incurred This Period</td> <td style="width:33%;">Payment This Period</td> <td style="width:34%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width:100%; text-align: right;" type="text" value="225.78"/></td> <td><input style="width:100%; text-align: right;" type="text" value=".00"/></td> <td><input style="width:100%; text-align: right;" type="text" value="225.78"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width:100%; text-align: right;" type="text" value="225.78"/>	<input style="width:100%; text-align: right;" type="text" value=".00"/>	<input style="width:100%; text-align: right;" type="text" value="225.78"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width:100%; text-align: right;" type="text" value="225.78"/>	<input style="width:100%; text-align: right;" type="text" value=".00"/>	<input style="width:100%; text-align: right;" type="text" value="225.78"/>					

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Walmart	Nature of Debt (Purpose): Invoice: Office Supplies						
Mailing Address 1201 Knox Ave							
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>North Augusta</td> <td>SC</td> <td>29841</td> </tr> </table>	City	State	Zip Code	North Augusta	SC	29841	
City	State	Zip Code					
North Augusta	SC	29841					

Outstanding Balance Beginning This Period <input style="width:100%; text-align: right;" type="text" value=".00"/>	Transaction ID : SD10-INV3842						
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">Amount Incurred This Period</td> <td style="width:33%;">Payment This Period</td> <td style="width:34%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width:100%; text-align: right;" type="text" value="14.28"/></td> <td><input style="width:100%; text-align: right;" type="text" value=".00"/></td> <td><input style="width:100%; text-align: right;" type="text" value="14.28"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width:100%; text-align: right;" type="text" value="14.28"/>	<input style="width:100%; text-align: right;" type="text" value=".00"/>	<input style="width:100%; text-align: right;" type="text" value="14.28"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width:100%; text-align: right;" type="text" value="14.28"/>	<input style="width:100%; text-align: right;" type="text" value=".00"/>	<input style="width:100%; text-align: right;" type="text" value="14.28"/>					

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Office Depot	Nature of Debt (Purpose): Invoice: Office Supplies						
Mailing Address 3675 Walton Way Extension							
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Augusta</td> <td>GA</td> <td>30909</td> </tr> </table>	City	State	Zip Code	Augusta	GA	30909	
City	State	Zip Code					
Augusta	GA	30909					

Outstanding Balance Beginning This Period <input style="width:100%; text-align: right;" type="text" value=".00"/>	Transaction ID : SD10-INV3841						
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">Amount Incurred This Period</td> <td style="width:33%;">Payment This Period</td> <td style="width:34%;">Outstanding Balance at Close of This Period</td> </tr> <tr> <td><input style="width:100%; text-align: right;" type="text" value="248.40"/></td> <td><input style="width:100%; text-align: right;" type="text" value=".00"/></td> <td><input style="width:100%; text-align: right;" type="text" value="248.40"/></td> </tr> </table>	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	<input style="width:100%; text-align: right;" type="text" value="248.40"/>	<input style="width:100%; text-align: right;" type="text" value=".00"/>	<input style="width:100%; text-align: right;" type="text" value="248.40"/>	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period					
<input style="width:100%; text-align: right;" type="text" value="248.40"/>	<input style="width:100%; text-align: right;" type="text" value=".00"/>	<input style="width:100%; text-align: right;" type="text" value="248.40"/>					

1) SUBTOTALS This Period This Page (optional) ▶	<input style="width:100%; text-align: right;" type="text" value="488.46"/>
2) TOTALS This Period (last page this line number only) ▶	<input style="width:100%; text-align: right;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	<input style="width:100%; text-align: right;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%; text-align: right;" type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
USPS

Nature of Debt (Purpose):
Invoice: Postage

Mailing Address 525 8th St

City State Zip Code
Augusta GA 30901

Outstanding Balance Beginning This Period
[] .00

Transaction ID : SD10-INV3843

Amount Incurred This Period
[] 234.00

Payment This Period
[] .00

Outstanding Balance at Close of This Period
[] 234.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Shell Oil

Nature of Debt (Purpose):
Invoice: Fuel

Mailing Address 3744 Wheeler Road

City State Zip Code
Augusta GA 30909

Outstanding Balance Beginning This Period
[] .00

Transaction ID : SD10-INV3844

Amount Incurred This Period
[] 88.11

Payment This Period
[] .00

Outstanding Balance at Close of This Period
[] 88.11

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Holiday Inn

Nature of Debt (Purpose):
Invoice: Lodging

Mailing Address 455 Commerce Drive

City State Zip Code
Statesboro GA 30461

Outstanding Balance Beginning This Period
[] .00

Transaction ID : SD10-INV3845

Amount Incurred This Period
[] 133.34

Payment This Period
[] .00

Outstanding Balance at Close of This Period
[] 133.34

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 2) **TOTALS** This Period (last page this line number only) ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

[] 455.45

[]

[]

[]

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor DigitalXpress Printing	Nature of Debt (Purpose): Invoice: Invitation Printing
Mailing Address 2211 Beaver Ruin Road Ste 170	
City State Zip Code Norcross GA 30071	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : SD10-INV3766
Amount Incurred This Period <input style="width:100%;" type="text" value="1804.28"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="1804.28"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jet Foods	Nature of Debt (Purpose): Invoice: Fuel
Mailing Address 3939 E. Main Street	
City State Zip Code Soperton GA 30457	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : SD10-INV3846
Amount Incurred This Period <input style="width:100%;" type="text" value="75.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="75.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Shell Oil	Nature of Debt (Purpose): Invoice: Fuel
Mailing Address 3744 Wheeler Road	
City State Zip Code Augusta GA 30909	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : SD10-INV3847
Amount Incurred This Period <input style="width:100%;" type="text" value="66.50"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="66.50"/>	

1) SUBTOTALS This Period This Page (optional) ▶	<input style="width:100%;" type="text" value="1945.78"/>
2) TOTALS This Period (last page this line number only) ▶	<input style="width:100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Cloister	Nature of Debt (Purpose): Invoice: Lodging
Mailing Address 100 Cloister Drive	
City State Zip Code Sea Island GA 31561	

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3848	
Amount Incurred This Period [3841.06]	Payment This Period [.00]	Outstanding Balance at Close of This Period [3841.06]

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capitol Response	Nature of Debt (Purpose): Invoice: FEC Compliance Consulting
Mailing Address 2700 Cumberland Parkway Suite 150	
City State Zip Code Atlanta GA 30339	

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3760	
Amount Incurred This Period [1750.00]	Payment This Period [.00]	Outstanding Balance at Close of This Period [1750.00]

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capitol Strategy Group	Nature of Debt (Purpose): Invoice: Fundraising Consulting
Mailing Address 2700 Cumberland Pkwy Ste 150	
City State Zip Code Atlanta GA 30339	

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3761	
Amount Incurred This Period [5031.89]	Payment This Period [.00]	Outstanding Balance at Close of This Period [5031.89]

1) SUBTOTALS This Period This Page (optional)	[10622.95]
2) TOTALS This Period (last page this line number only)	[]
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	[]
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	[]

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Edgars Grille	Nature of Debt (Purpose): Invoice: Event Expenses
Mailing Address 3165 Washington Road	
City State Zip Code Augusta GA 30907	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>	Transaction ID : SD10-INV3769	
Amount Incurred This Period <input type="text" value="3888.00"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="3888.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Air Charter Team Inc.	Nature of Debt (Purpose): Invoice: Travel for Ryan Event
Mailing Address 4151 N. Mulberry Drive Suite 250	
City State Zip Code Kansas City MO 64116	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>	Transaction ID : SD10-INV3806	
Amount Incurred This Period <input type="text" value="2943.08"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="2943.08"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NationBuilder	Nature of Debt (Purpose): Invoice: Computer Software
Mailing Address 448 S Hill Street #200	
City State Zip Code Los Angeles CA 90013	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>	Transaction ID : SD10-INV3849	
Amount Incurred This Period <input type="text" value="499.00"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="499.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="7330.08"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 139 OF 147
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cline X Design		Nature of Debt (Purpose): Invoice: Photography
Mailing Address 1977 Dibble Rd		
City	State	Zip Code
Aiken	SC	29801

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3763	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="400.00"/>	<input type="text" value=".00"/>	<input type="text" value="400.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Party 'N' Dollar		Nature of Debt (Purpose): Invoice: Event Supplies
Mailing Address 592 Bobby Jones Expressway		
City	State	Zip Code
Augusta	GA	30907

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3850	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="29.66"/>	<input type="text" value=".00"/>	<input type="text" value="29.66"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Southern Beverage Outlet		Nature of Debt (Purpose): Invoice: Event Costs
Mailing Address 248 Bobby Jones Expressway		
City	State	Zip Code
Augusta	GA	30907

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3851	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="282.17"/>	<input type="text" value=".00"/>	<input type="text" value="282.17"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="711.83"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 140 OF 147
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Push Digital		Nature of Debt (Purpose): Invoice: Website - November
Mailing Address PO Box 7431		
City	State	Zip Code
Columbia	SC	29202

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3798	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2000.00"/>	<input type="text" value=".00"/>	<input type="text" value="2000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Richard & Delores Des Reis		Nature of Debt (Purpose): Invoice: Campaign Office Rent - November
Mailing Address 748 Jones Creek		
City	State	Zip Code
Augusta	GA	30907

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3799	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1700.00"/>	<input type="text" value=".00"/>	<input type="text" value="1700.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rhinehart's Oyster Bar		Nature of Debt (Purpose): Invoice: Event Catering
Mailing Address 3051 Washington Road		
City	State	Zip Code
Augusta	GA	30909

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3852	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="274.88"/>	<input type="text" value=".00"/>	<input type="text" value="274.88"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="3974.88"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Staples	Nature of Debt (Purpose): Invoice: Office Supplies
Mailing Address 246 Robert C. Daniels Jr. Pkwy	
City State Zip Code Augusta GA 30909	

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3853	
Amount Incurred This Period [19.41]	Payment This Period [.00]	Outstanding Balance at Close of This Period [19.41]

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Shane's Rib Shack	Nature of Debt (Purpose): Invoice: Event Catering
Mailing Address 4446 Washington Road Suite 1	
City State Zip Code Evans GA 30809	

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3854	
Amount Incurred This Period [1002.00]	Payment This Period [.00]	Outstanding Balance at Close of This Period [1002.00]

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Party City	Nature of Debt (Purpose): Invoice: Event Costs
Mailing Address 249 Robert C Daniel Jr Pkwy	
City State Zip Code Augusta GA 30909	

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3855	
Amount Incurred This Period [29.76]	Payment This Period [.00]	Outstanding Balance at Close of This Period [29.76]

1) SUBTOTALS This Period This Page (optional)	[1051.17]
2) TOTALS This Period (last page this line number only)	[]
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	[]
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	[]

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 142 OF 147
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Air Charter Team Inc.	Nature of Debt (Purpose): Invoice: Travel for McCarthy Event
Mailing Address 4151 N. Mulberry Drive Suite 250	
City State Zip Code Kansas City MO 64116	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>	Transaction ID : SD10-INV3807	
Amount Incurred This Period <input type="text" value="3922.21"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="3922.21"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hilton Garden Inn	Nature of Debt (Purpose): Invoice: Event Costs
Mailing Address 1065 Stevens Creek Road	
City State Zip Code Augusta GA 30907	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>	Transaction ID : SD10-INV3856	
Amount Incurred This Period <input type="text" value="3000.00"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="3000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hilton Garden Inn	Nature of Debt (Purpose): Invoice: Event Costs
Mailing Address 1065 Stevens Creek Road	
City State Zip Code Augusta GA 30907	

Outstanding Balance Beginning This Period <input type="text" value=".00"/>	Transaction ID : SD10-INV3857	
Amount Incurred This Period <input type="text" value="50.00"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <input type="text" value="50.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="6972.21"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Card Services Center

Nature of Debt (Purpose):

Invoice: Annual Fee

Mailing Address PO Box 105025

City State

Zip Code

Atlanta

GA

30348

Outstanding Balance Beginning This Period

Transaction ID : SD10-INV3858

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Card Services Center

Nature of Debt (Purpose):

Invoice: Fees

Mailing Address PO Box 105025

City State

Zip Code

Atlanta

GA

30348

Outstanding Balance Beginning This Period

Transaction ID : SD10-INV3859

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Candidate Command LLC

Nature of Debt (Purpose):

Invoice: Phone Calls

Mailing Address 1420 NW Vivion Ste 113

City

State

Zip Code

Kansas City

MO

64118

Outstanding Balance Beginning This Period

Transaction ID : SD10-INV3759

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

2) **TOTALS** This Period (last page this line number only)

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
William Wheat

Mailing Address PO Box 944

City State Zip Code
 Langley SC 29834

Nature of Debt (Purpose):
 Invoice: Win Bonus

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3790	
.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
5000.00	.00	5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lauren Swing

Mailing Address 807 Saint Andrews Drive

City State Zip Code
 Augusta GA 30909

Nature of Debt (Purpose):
 Invoice: Win Bonus

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3791	
.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
15000.00	.00	15000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Gober Hilgers PLLC

Mailing Address 2101 Cedar Springs Rd #1050

City State Zip Code
 Dallas TX 75201

Nature of Debt (Purpose):
 Invoice: Legal Fees

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3780	
.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
322.50	.00	322.50

1) SUBTOTALS This Period This Page (optional)	20322.50
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Right Path Strategic Affairs

Mailing Address 3960 Rolling Hills Drive

City State Zip Code
 Cumming GA 30041

Nature of Debt (Purpose):
 Invoice: Win Bonus

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3800	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="25000.00"/>	<input type="text" value=".00"/>	<input type="text" value="25000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Right Path Strategic Affairs

Mailing Address 3960 Rolling Hills Drive

City State Zip Code
 Cumming GA 30041

Nature of Debt (Purpose):
 Invoice: Campaign consulting

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3801	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="10000.00"/>	<input type="text" value=".00"/>	<input type="text" value="10000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Capitol Strategy Group

Mailing Address 2700 Cumberland Pkwy Ste 150

City State Zip Code
 Atlanta GA 30339

Nature of Debt (Purpose):
 Invoice: Fundraising Consulting

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3762	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="25000.00"/>	<input type="text" value=".00"/>	<input type="text" value="25000.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="60000.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tactical Communications Solutions

Nature of Debt (Purpose):
Invoice: Communications Consulting Fee

Mailing Address 428 Collier Road NW

City State Zip Code
Atlanta GA 30309

Outstanding Balance Beginning This Period

Transaction ID : SD10-INV3802

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tactical Communications Solutions

Nature of Debt (Purpose):
Invoice: Win Bonus

Mailing Address 428 Collier Road NW

City State Zip Code
Atlanta GA 30309

Outstanding Balance Beginning This Period

Transaction ID : SD10-INV3803

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Strategic Advance Services LLC

Nature of Debt (Purpose):
Invoice: Travel for Boehner Event

Mailing Address 611 Pennsylvania Avenue SE #267

City State Zip Code
Washington DC 20003

Outstanding Balance Beginning This Period

Transaction ID : SD10-INV3758

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

2) **TOTALS** This Period (last page this line number only)

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Push Digital	Nature of Debt (Purpose): Invoice: Email Marketing
Mailing Address PO Box 7431	
City State Zip Code Columbia SC 29202	

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3797	
Amount Incurred This Period [739.43]	Payment This Period [.00]	Outstanding Balance at Close of This Period [739.43]

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The M Group LLC	Nature of Debt (Purpose): Invoice: Fundraising Fee
Mailing Address 100 Luna Park Drive #156	
City State Zip Code Alexandria VA 22305	

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3805	
Amount Incurred This Period [15360.00]	Payment This Period [.00]	Outstanding Balance at Close of This Period [15360.00]

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gober Hilgers PLLC	Nature of Debt (Purpose): Invoice: Legal Fees
Mailing Address 2101 Cedar Springs Rd #1050	
City State Zip Code Dallas TX 75201	

Outstanding Balance Beginning This Period [.00]	Transaction ID : SD10-INV3820	
Amount Incurred This Period [70.00]	Payment This Period [.00]	Outstanding Balance at Close of This Period [70.00]

1) SUBTOTALS This Period This Page (optional)	[16169.43]
2) TOTALS This Period (last page this line number only)	[191524.56]
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	[1000000.00]
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	[1191524.56]