

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

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

1. NAME OF COMMITTEE IN FULL Rick W. Allen for Congress			
ADDRESS (number and street) P.O. Box 338			
CITY Augusta	STATE GA	ZIP CODE 30903-0338	
2. NAME OF CANDIDATE Allen, Richard, W., ,		3. OFFICE SOUGHT (State and District) House GA 12	
4. FEC IDENTIFICATION NUMBER C00504019			
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME Walker, Robert, J., ,			
MAILING ADDRESS 1854 Marion Street		Name of Employer None	
CITY Dublin	STATE GA	ZIP CODE 31021-3341	Date (month, day, year) 10/24/2020
		Transaction ID : 6414B5E69D8C14C70	
		Occupation Retired	
Amount 2000.00			
B. FULL NAME Deal, J Ben, , Dr.,			
MAILING ADDRESS 3502 Wheeler Road		Name of Employer Self Employed	
CITY Augusta	STATE GA	ZIP CODE 30909-1824	Date (month, day, year) 10/25/2020
		Transaction ID : 66B17C88B893A4B84	
		Occupation Dentist	
Amount 1000.00			
C. FULL NAME Dore, William, J., , Sr.			
MAILING ADDRESS 3773 W. Jackson Boulevard		Name of Employer None	
CITY Mountain Brk	STATE AL	ZIP CODE 35213-4235	Date (month, day, year) 10/25/2020
		Transaction ID : 6CE3E92ED954849D9	
		Occupation Retired	
Amount 2800.00			
D. FULL NAME Pratt, Hugh, K., ,			
MAILING ADDRESS 4275 Owens Road No. 1102		Name of Employer None	
CITY Evans	STATE GA	ZIP CODE 30809-3309	Date (month, day, year) 10/25/2020
		Transaction ID : 69597EFB3432A4D9E	
		Occupation Retired	
Amount 1000.00			
E. FULL NAME National Automobile Dealers Association Political Action Committee (NADA PAC)			
MAILING ADDRESS 412 1st St SE		Name of Employer	
CITY Washington	STATE DC	ZIP CODE 20003-1804	Date (month, day, year) 10/25/2020
		Transaction ID : 6ED4424939A6E4CD	
		Occupation	
Amount 5000.00			
SIGNATURE (optional) Meybohm, E. G., , ,			DATE 10/26/2020
[Electronically Filed]			For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100

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Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
The Home Depot Inc. Political Action Committee 1155 F Street NW, Suite 400 Washington DC 20004-1346	Name of Employer Occupation Transaction ID : 60CF16A9470DA440EA12	Date (month, day, year) 10/25/2020	Amount 5000.00
Squire Patton Boggs Political Action Committee 2550 M St NW Washington DC 20037-1301	Name of Employer Occupation Transaction ID : 636318D449DC54020840	Date (month, day, year) 10/25/2020	Amount 1000.00
U.S. Peanut PAC 313 Massachusetts Ave NE Washington DC 20002-5701	Name of Employer Occupation Transaction ID : 607D254F6DA7E46CAADE	Date (month, day, year) 10/25/2020	Amount 2500.00
Perry, Wondal, , Mrs., 20 Tall Pine Cir Augusta GA 30909-4538	Name of Employer None Occupation Retired Transaction ID : 6F73727D1201E40B9B2E	Date (month, day, year) 10/25/2020	Amount 1000.00
Beazley, Bill, B., Mr., 1437 Ashwood Dr Evans GA 30809-5008	Name of Employer Self Employed Occupation Homebuilder Transaction ID : 6B717656A5ED2478C9F1	Date (month, day, year) 10/25/2020	Amount 1000.00

continuation page

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE Allgood, Terri, , Mrs., 819 Milledge Rd Augusta GA 30904-4339	Name of Employer None Transaction ID : 6020C0B1323D64BB6923 Occupation Homemaker	Date (month, day, year) 10/25/2020	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount