

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED

2012 JUL 16 AM 7:06 Office Use Only

FEC MAIL CENTER

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. Committee to elect Brian Ryan B Doyle to Congress

ADDRESS (number and street) P.O. Box 1391 Greenwood SC 29648- Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C 00515296 3. IS THIS REPORT NEW (N) OR AMENDED (A) SC 03

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) X 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 11 ' 06 ' 20 12 in the State of SC (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 05 ' 28 ' 20 12 through 07 ' 07 ' 20 12

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 Eric M Bruders Signature of Treasurer Eric M Bruders Date 07 ' 08 ' 20 12

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

Office Use Only grid and FEC FORM 3 (Revised 02/2003)

12030843677

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Committee to elect Brian Ryan B Doyle to Congress

Report Covering the Period:

From:

05 ' 28 ' 2012

To:

07 ' 07 ' 2012

12030843678

	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))	, , 100.00	, , 350.00
(b) Total Contribution Refunds (from Line 20(d))	, , 0.00	, , 0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	, , 100.00	, , 350.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	, 3,848.26	, , .
(b) Total Offsets to Operating Expenditures (from Line 14)	, , 0.00	, , .
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	, 3,848.26	, , .
8. Cash on Hand at Close of Reporting Period (from Line 27)	, , 182.52	
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)	, 15,388.53	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Report Covering the Period: From:

M M / D D / Y Y Y Y

To:

M M / D D / Y Y Y Y

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

, , 100.00

(ii) Unitemized.....

, , .00

(iii) TOTAL of contributions
from individuals ▶

, , 100.00

(b) Political Party Committees.....

, , .00

(c) Other Political Committees
(such as PACs).....

, , .00

(d) The Candidate.....

, , .00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

, , 100.00

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES.....

, , .00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

, , 3,848.26

(b) All Other Loans.....

, , .00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

, , 3,848.26

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.).....

, , .00

15. OTHER RECEIPTS
(Dividends, Interest, etc.).....

, , .00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

, , 3,848.00

12030843679

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	3,848.26			
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES00			
19. LOAN REPAYMENTS:				
(a) Of Loans Made or Guaranteed by the Candidate.....				
(b) Of All Other Loans				
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....				
20. REFUNDS OF CONTRIBUTIONS TO:				
(a) Individuals/Persons Other Than Political Committees				
(b) Political Party Committees.....				
(c) Other Political Committees (such as PACs).....				
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....				
21. OTHER DISBURSEMENTS				
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	3,848.26			

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	82.50
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3,848.26
25. SUBTOTAL (add Line 23 and Line 24).....	3,930.76
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3,848.26
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	182.50

12030843680

**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 1 OF 1
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)

Full Name (Last, First, Middle Initial) A. Edward Fitts		Date of Receipt 07' 05' 20' 12
Mailing Address 230 Peachtree St Suite 900		Amount of Each Receipt this Period , , 100.00
City ATLANTA	State GA Zip Code 30303	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , 100.00
Name of Employer Fitts & Associates	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 100.00	

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

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

SUBTOTAL of Receipts This Page (optional).....	, , 100.00
TOTAL This Period (last page this line number only).....	, , 100.00

12030843681

**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 1 OF 21

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Committee to elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. Hickory Point #40
Mailing Address 100 S Greenwood St

Date of Disbursement

05 ' 14 ' 2012

City Abbeville State SC Zip Code 29620

Amount of Each Disbursement this Period

, , 50.00

Purpose of Disbursement
Fuel - Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: SC District: 03

Disbursement For:
 Primary General
 Other (specify)

Full Name (Last, First, Middle Initial)

B. Verizon Wireless
Mailing Address

Date of Disbursement

05 ' 28 ' 2012

City State Zip Code

Amount of Each Disbursement this Period

, , 406.00

Purpose of Disbursement
Cell-Phones Campaign

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Full Name (Last, First, Middle Initial)

C. QuickTrip #
Mailing Address 1395 Georgia Hwy

Date of Disbursement

05 ' 29 ' 2012

City ATL State GA Zip Code 30303

Amount of Each Disbursement this Period

, , 42.80

Purpose of Disbursement
Fuel - Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: SC District: 03

Disbursement For:
 Primary General
 Other (specify)

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

, , 492.80

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

, , 3,695.66

12030843682

**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 2 OF 24

17
20a 18
20b 19a
20c 19b
21

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NAME OF COMMITTEE (In Full)

Committee to elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. Sam's Mart

Mailing Address

Date of Disbursement

05^M ' 31^D ' 20^Y12^Y

City Anderson State SC Zip Code

Amount of Each Disbursement this Period

, , 50.00

Purpose of Disbursement
Fuel - Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: SC District: 03

Full Name (Last, First, Middle Initial)

B. U.S. Postal Service

Mailing Address

Date of Disbursement

05^M ' 17^D ' 20^Y12^Y

City Anderson State SC Zip Code

Amount of Each Disbursement this Period

, , 90.00

Purpose of Disbursement
STAMPS - mailing

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: SC District: 03

Full Name (Last, First, Middle Initial)

C. Circle K Store

Mailing Address

1035 Edgefield RD

Date of Disbursement

06^M ' 02^D ' 20^Y12^Y

City North Augusta State SC Zip Code

Amount of Each Disbursement this Period

, , 50.50

Purpose of Disbursement
Fuel - Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

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

, , 19050
, , 3,695.66

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

12030843683

**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 3 OF 21

17
20a 18
20b 19a
20c 19b
21

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NAME OF COMMITTEE (in Full)

Committee to Elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. *Chevron GAS*

Date of Disbursement

06 ' 22 ' 2012

Mailing Address

City *North* State *Augusta SC* Zip Code

Amount of Each Disbursement this Period

, , *40.00*

Purpose of Disbursement
Fuel TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. *FAT MATT'S R.B SHACK*

Date of Disbursement

06 ' 22 ' 2012

Mailing Address

City *Augusta* State *GA* Zip Code

Amount of Each Disbursement this Period

, , *29.16*

Purpose of Disbursement
TRAVEL - LUNCH

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. *SAM'S MART*

Date of Disbursement

06 ' 24 ' 2012

Mailing Address

1892 Howell Mill rd

City State Zip Code

Amount of Each Disbursement this Period

, , *40.00*

Purpose of Disbursement
Fuel TRAVEL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

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

, , *109.16*

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

, , *3,695.66*

12030843684

**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 4 OF 21

<input 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)

Committee to Elect Brian Ryan B Doyle to Congress

<p>A. <i>Office Depot</i></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address</p> <p>City <i>North Augusta</i> State <i>SC</i> Zip Code</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>State: District:</p>		<p>Date of Disbursement</p> <p><i>06 ' 25 ' 2012</i></p> <p>Amount of Each Disbursement this Period</p> <p>, , <i>75.58</i></p>
<p>B. <i>Quiktrip</i></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address</p> <p>City <i>Conyers</i> State <i>GA</i> Zip Code</p> <p>Purpose of Disbursement</p> <p><i>STAFF - TRAVEL</i></p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>State: District:</p>		<p>Date of Disbursement</p> <p><i>06 ' 19 ' 2012</i></p> <p>Amount of Each Disbursement this Period</p> <p>, , <i>52.00</i></p>
<p>C. <i>Palmetto C-Street #1</i></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address</p> <p>City <i>Aiken</i> State <i>SC</i> Zip Code</p> <p>Purpose of Disbursement</p> <p><i>Travel - Fuel</i></p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>State: District:</p>		<p>Date of Disbursement</p> <p><i>06 ' 11 ' 2012</i></p> <p>Amount of Each Disbursement this Period</p> <p>, , <i>40.00</i></p>
<p>SUBTOTAL of Disbursements This Page (optional).....</p>		<p>, , <i>167.58</i></p>
<p>TOTAL This Period (last page this line number only).....</p>		<p>, , <i>3,695.46</i></p>

12030843685

**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)			
	<input 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)

Full Name (Last, First, Middle Initial) A. SHELL V Power		Date of Disbursement 06 ' 12 ' 20 ' 12
Mailing Address 3228 Hwy 25 South		Amount of Each Disbursement this Period , , 50.00
City Greenwood	State SC	
Zip Code 29646		Category/ Type
Purpose of Disbursement Fuel TRAVEL		
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: SC District: 03		

Full Name (Last, First, Middle Initial) B. Hickory Point # 40		Date of Disbursement 06 ' 12 ' 20 ' 12
Mailing Address 100 S Greenwood St		Amount of Each Disbursement this Period , , 25.00
City Abbeville	State SC	
Zip Code 29620		Category/ Type
Purpose of Disbursement Fuel TRAVEL		
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: SC District: 03		

Full Name (Last, First, Middle Initial) C. Chevrons Foodmart		Date of Disbursement 06 ' 30 ' 20 ' 12
Mailing Address 490 Whitehall		Amount of Each Disbursement this Period , , 30.00
City	State	
Zip Code		Category/ Type
Purpose of Disbursement Fuel TRAVEL		
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: SC District: 03		

SUBTOTAL of Disbursements This Page (optional).....	, , 105.00
TOTAL This Period (last page this line number only).....	, , 3,695.66

12030843686

**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)			
	<input 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)
Committee to elect Brian Ryan B Doyle to Congress

12030843687

Full Name (Last, First, Middle Initial) A. SHELL ✓		Date of Disbursement 06 ' 20 ' 2012	
Mailing Address		Amount of Each Disbursement this Period 40.02	
City North Augusta	State SC		Zip Code
Purpose of Disbursement Fuel - TRAVEL	Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: SC	District: 03		

Full Name (Last, First, Middle Initial) B. SPRINT FOODS		Date of Disbursement 06 ' 13 ' 2012	
Mailing Address 4681 Jefferson Davis		Amount of Each Disbursement this Period 50.00	
City Clearwater	State SC		Zip Code 29843
Purpose of Disbursement Fuel TRAVEL	Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: SC	District: 03		

Full Name (Last, First, Middle Initial) C. SPRINT FOOD		Date of Disbursement 06 ' 13 ' 2012	
Mailing Address 4681 Jefferson Davis		Amount of Each Disbursement this Period 58.00	
City Clearwater	State SC		Zip Code 29843
Purpose of Disbursement Fuel TRAVEL - STAFF	Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	, 148.02
TOTAL This Period (last page this line number only).....	, 3,695.66

**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 **7** OF **21**

17
20a 18
20b 19a
20c 19b
21

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NAME OF COMMITTEE (in Full)

Committee to elect Brian Ryan B. Doyle to Congress

Full Name (Last, First, Middle Initial)

A. Quiktrip GAS

Mailing Address

Date of Disbursement

06 ' 17 ' 2012

City Anderson State SC Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement
Fuel Travel

, , 43.01

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: SC District: 03

Full Name (Last, First, Middle Initial)

B. STOP A MINI

Mailing Address

Date of Disbursement

06 ' 05 ' 2012

City Anderson State SC Zip Code 29621

Amount of Each Disbursement this Period

Purpose of Disbursement
Fuel Travel

, , 41.49

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Sam's Mart

Mailing Address

Date of Disbursement

06 ' 07 ' 2012

City ATLANTA State GA Zip Code 30318

Amount of Each Disbursement this Period

Purpose of Disbursement
Fuel - Staff

, , 40.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

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

, , 124.50

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

, , 3,695.06

12030843688

**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 8 OF 21

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement 06 ' 27 ' 2012
Mailing Address		Amount of Each Disbursement this Period , , 21.75
City Augusta	State GA	
Purpose of Disbursement Label for Postage	Zip Code	Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 03		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement 06 ' 27 ' 2012
Mailing Address		Amount of Each Disbursement this Period , , 23.19
City Augusta	State GA	
Purpose of Disbursement envelopes	Zip Code	Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 03		

Full Name (Last, First, Middle Initial) C. U.S. Postal Services		Date of Disbursement 06 ' 22 ' 2012
Mailing Address Main St		Amount of Each Disbursement this Period , , 300.00
City Aiken	State SC	
Purpose of Disbursement Stamps to Mail letters	Zip Code 29801	Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

, 344.94

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

, 3,695.66

12030843689

**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 9 OF 21

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Committee to elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. U.S. Postal Services

Date of Disbursement

06' 23' 2012

Mailing Address

City Aiken State SC Zip Code 2980

Amount of Each Disbursement this Period

, , 150.00

Purpose of Disbursement
STAMPS TO MAIL LETTER

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: SC District: 03

Full Name (Last, First, Middle Initial)

B. Circle K

Date of Disbursement

06' 13' 2012

Mailing Address

1035 Edgefield RD

City North August State SC Zip Code 29800

Amount of Each Disbursement this Period

, , 40.00

Purpose of Disbursement
Fuel Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: SC District: 03

Full Name (Last, First, Middle Initial)

C. SPINX

Date of Disbursement

06' 12' 2012

Mailing Address

7395 Augusta RD

City Redmont State SC Zip Code 29673

Amount of Each Disbursement this Period

, , 30.00

Purpose of Disbursement
Fuel Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: SC District: 03

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

, , 220.00

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

, , 3,695.64

12030843690

**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 10 OF 21

<input 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 (Full)

Committee to elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial) A. U.S. Postal Services		Date of Disbursement 06 ' 26 ' 2012
Mailing Address		Amount of Each Disbursement this Period , , 135.00
City ATLANTA	State GA	
Zip Code 30303		Amount of Each Disbursement this Period , , 45.00
Purpose of Disbursement Stamps	Category/ Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period , , 40.12
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: SC District: 03	
Full Name (Last, First, Middle Initial) B. U.S. Postal Services		Date of Disbursement 06 ' 29 ' 2012
Mailing Address		Amount of Each Disbursement this Period , , 220.12
City ATLANTA	State GA	
Zip Code 30303		Amount of Each Disbursement this Period , , 3,695.66
Purpose of Disbursement Stamps	Category/ Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period , , 40.12
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: SC District: 03	
Full Name (Last, First, Middle Initial) C. Office Depot		Date of Disbursement 06 ' 28 ' 2012
Mailing Address 859 Springs St		Amount of Each Disbursement this Period , , 40.12
City ATLANTA	State GA	
Zip Code 30308		Amount of Each Disbursement this Period , , 40.12
Purpose of Disbursement Envelopes & Supplies	Category/ Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period , , 40.12
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: SC District: 03	
SUBTOTAL of Disbursements This Page (optional).....		, , 220.12
TOTAL This Period (last page this line number only).....		, , 3,695.66

12030843691

**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 <u>11</u> OF <u>21</u>
	<input 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)
Committee to elect Brian Ryan B. Doble to Congress

Full Name (Last, First, Middle Initial) A. LIL 256 Cricket		Date of Disbursement 06' 13' 2012
Mailing Address 922 Nance ST		Amount of Each Disbursement this Period , , 69.00
City Newberry	State SC	
Zip Code 29101		Category/ Type
Purpose of Disbursement Fuel Travel		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC	District: 03	

Full Name (Last, First, Middle Initial) B. Precision Tune		Date of Disbursement 06' 11' 20' 12'
Mailing Address 143 Pine log RD		Amount of Each Disbursement this Period , , 24.87
City Aiken	State SC	
Zip Code 29801		Category/ Type
Purpose of Disbursement Oil Change for Primary Travel		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC	District: 03	

Full Name (Last, First, Middle Initial) C. Cracker Barrel		Date of Disbursement 06' 12' 2012
Mailing Address Pine log RD		Amount of Each Disbursement this Period , , 29.98
City Aiken	State SC	
Zip Code 29801		Category/ Type
Purpose of Disbursement Luncheon - STAFF		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	, , 123.85
TOTAL This Period (last page this line number only).....	, , 3,695.66

12030843692

**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)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (in Full)
Committee to elect Brian Ryan B Dayh to Congress

A. Kangaroo Express 3246

Full Name (Last, First, Middle Initial)

Mailing Address: **1107 York St**

City: **Aiken** State: **SC** Zip Code: **29801**

Purpose of Disbursement: **Fuel Travel**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **SC** District: **03**

Date of Disbursement: **06 ' 12 ' 2012**

Amount of Each Disbursement this Period: **, , 25.00**

B. Palmetto C-store

Full Name (Last, First, Middle Initial)

Mailing Address: **1118 Edgefield RD**

City: **Aiken** State: **SC** Zip Code

Purpose of Disbursement: **Fuel Travel**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **SC** District: **03**

Date of Disbursement: **06 ' 09 ' 2012**

Amount of Each Disbursement this Period: **, , 49.01**

C. Race Way

Full Name (Last, First, Middle Initial)

Mailing Address: **1981 Eatonton Hwy**

City: **Madison** State: **GA** Zip Code

Purpose of Disbursement: **Fuel Travel**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **SC** District: **03**

Date of Disbursement: **06 ' 08 ' 2012**

Amount of Each Disbursement this Period: **, , 50.00**

SUBTOTAL of Disbursements This Page (optional)..... **, , 124.01**

TOTAL This Period (last page this line number only)..... **, , 3,695.66**

12030843693

**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)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

PAGE 13 OF 21

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NAME OF COMMITTEE (In Full)

A. SAMS MART

Full Name (Last, First, Middle Initial)

Mailing Address

City Aiken State SC Zip Code

Purpose of Disbursement Fuel Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: SC District: 03

Date of Disbursement 06 ' 28 ' 2012

Amount of Each Disbursement this Period
, , 20.02

B. Circle K

Full Name (Last, First, Middle Initial)

Mailing Address 115 Laurel Lakes Dr

City N. Augusta State GA Zip Code 29841

Purpose of Disbursement Fuel Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: SC District: 03

Date of Disbursement 06 ' 04 ' 2012

Amount of Each Disbursement this Period
, , 50.00

C. Race Rac

Full Name (Last, First, Middle Initial)

Mailing Address

City North Augusta State SC Zip Code

Purpose of Disbursement Fuel Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: SC District: 03

Date of Disbursement 06 ' 25 ' 2012

Amount of Each Disbursement this Period
, , 30.00

SUBTOTAL of Disbursements This Page (optional)....., 100.02

TOTAL This Period (last page this line number only)....., 3,695.66

12030843694

**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)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Committee to elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. Trophics Unlimited

Mailing Address

4020 Trolley Line Rd

City Aiken

State SC

Zip Code 29801

Purpose of Disbursement

Fuel Travel

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: SC

District: 63

Date of Disbursement

06 ' 04 ' 2012

Amount of Each Disbursement this Period

, , 19.26

Full Name (Last, First, Middle Initial)

B. Race Trac 204

Mailing Address

305800 Hwy 441 South

City Commerce CA

State

Zip Code

Purpose of Disbursement

Fuel Travel

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Date of Disbursement

06 ' 05 ' 2012

Amount of Each Disbursement this Period

, , 45.00

Full Name (Last, First, Middle Initial)

C. Quick Pantry 101

Mailing Address

2170 University PA

City Aiken

State SC

Zip Code 29801

Purpose of Disbursement

Fuel

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: SC

District: 03

Date of Disbursement

06 ' 12 ' 2012

Amount of Each Disbursement this Period

, , 25.01

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

, , 89.27

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

, 3,695.46

12030843695

**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 <u>16</u> OF <u>21</u>
	<input 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)
Committee to elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial) <u>A. Grego Gas Plus</u>		Date of Disbursement <u>06' 02' 20' 12</u>
Mailing Address <u>1186 Edgefield SC</u>		Amount of Each Disbursement this Period <u>, , 27.50</u>
City <u>N. Augusta</u>	State <u>SC</u> Zip Code <u>29860</u>	
Purpose of Disbursement <u>Fuel - GAS</u>		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>SC</u> District: <u>03</u>		

Full Name (Last, First, Middle Initial) <u>B. VINNY'S PIZZA</u>		Date of Disbursement <u>06' 30' 20' 12</u>
Mailing Address		Amount of Each Disbursement this Period <u>, , 17.71</u>
City <u>Columbia</u>	State <u>SC</u> Zip Code	
Purpose of Disbursement <u>Fuel - Campaign</u>		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>SC</u> District: <u>03</u>		

Full Name (Last, First, Middle Initial) <u>C. Circle K</u>		Date of Disbursement <u>06' 25' 20' 12</u>
Mailing Address <u>1035 Edgefield Hwy</u>		Amount of Each Disbursement this Period <u>, , 50.00</u>
City <u>N. Augusta</u>	State <u>SC</u> Zip Code <u>29860</u>	
Purpose of Disbursement <u>Fuel - Campaign</u>		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>SC</u> District: <u>03</u>		

SUBTOTAL of Disbursements This Page (optional).....	, ,
TOTAL This Period (last page this line number only).....	, <u>3,695.69</u>

12030843697

**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)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

PAGE 17 OF 21

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NAME OF COMMITTEE (In Full)
Committee to elect Brian Ryan B Dayh to Congress

A. *Greg Allen Fuel*
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City *N. Augusta* State *SC* Zip Code
 Purpose of Disbursement *Fuel - Campaign*
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: *SC* District: *03*
 Date of Disbursement *06' 24' 2012*
 Amount of Each Disbursement this Period
 , , *50.00*

B. *THE T SHIRT Shoppe*
 Full Name (Last, First, Middle Initial)
 Mailing Address *Richland Ave*
 City *Aiken* State *SC* Zip Code *29801*
 Purpose of Disbursement *Campaign sign stickers*
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: District:
 Date of Disbursement *06' 04' 2012*
 Amount of Each Disbursement this Period
 , , *80.00*

C. *Chevron GAS*
 Full Name (Last, First, Middle Initial)
 Mailing Address *1192 B Pryor St*
 City *Atlanta* State *GA* Zip Code
 Purpose of Disbursement *Fuel - Staff*
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: District:
 Date of Disbursement *06' 27' 2012*
 Amount of Each Disbursement this Period
 , , *40.00*

SUBTOTAL of Disbursements This Page (optional)..... , , *170.00*
 TOTAL This Period (last page this line number only)..... , , *3,695.66*

12030843698

**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 18 OF 21

<input 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)

Committee to Elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Date of Disbursement

07' 01' 2012

Mailing Address

City Aiken SC State SC Zip Code 29802

Amount of Each Disbursement this Period

, , 400.00

Purpose of Disbursement Cell-Phone Campaign

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: SC District: 03

Full Name (Last, First, Middle Initial)

B. Little CHINA

Date of Disbursement

07' 06' 2012

Mailing Address

1018 York Street

City Aiken SC State SC Zip Code 29801

Amount of Each Disbursement this Period

, , 11.55

Purpose of Disbursement Food-Travel

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. TA Travel Center

Date of Disbursement

07' 06' 2012

Mailing Address

45 Travel Center

City Madison GA State GA Zip Code

Amount of Each Disbursement this Period

, , 40.02

Purpose of Disbursement Fuel-Staff Travel

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

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

, , 451.57

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

, , 3,695.66

12030843699

**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 19 OF 21

<input 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)

Committee to elect Brian Ryan B. Doyle to Congress

Full Name (Last, First, Middle Initial)

A. SAM'S Mart

Date of Disbursement

07 ' 05 ' 20 12

Mailing Address

1892 Howell Mill Rd

Amount of Each Disbursement this Period

, , 25.00

City

ATL.

State

GA

Zip Code

30318

Purpose of Disbursement

Fuel GAS

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: SC

District: 03

Full Name (Last, First, Middle Initial)

B. Hickory Point

Date of Disbursement

07 ' 06 ' 20 12

Mailing Address

1401 S. Main St

Amount of Each Disbursement this Period

, , 70.01

City

Greenwood

State

SC

Zip Code

29646

Purpose of Disbursement

Fuel - GAS

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: SC

District: 03

Full Name (Last, First, Middle Initial)

C. U.S Postal Service

Date of Disbursement

07 ' 03 ' 20 12

Mailing Address

Amount of Each Disbursement this Period

, , 36.00

City

Aiken

State

Zip Code

Purpose of Disbursement

Postage

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: SC

District: 03

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

, , 131.01

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

, , 3,695.66

12030843700

**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 20 OF 21

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Committee to elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. Northside Food Mart

Mailing Address

Date of Disbursement

07 ' 08 ' 2012

City Arken State SC Zip Code

Amount of Each Disbursement this Period

, , 35.01

Purpose of Disbursement

Fuel Travel

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: SC District: 03

Full Name (Last, First, Middle Initial)

B. Papa Johns Pizza

Mailing Address

Date of Disbursement

07 ' 08 ' 2012

City Greenwood State SC Zip Code

Amount of Each Disbursement this Period

, , 27.00

Purpose of Disbursement

Staff meeting food

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: SC District: 03

Full Name (Last, First, Middle Initial)

C. Pizza Cheese Cake

Mailing Address

Date of Disbursement

03 ' 12 ' 2012

City ATLANTA State GA Zip Code 30309

Amount of Each Disbursement this Period

, , 90.59

Purpose of Disbursement

Food - staff

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: SC District: 03

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

, , 152.60

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

, , 3,695.06

12030843701

**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)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

PAGE 21 OF 21

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NAME OF COMMITTEE (in Full)

A. Cooks Roadside Market

Full Name (Last, First, Middle Initial)

Mailing Address

City Trenton State SC Zip Code

Purpose of Disbursement Food - STAFF

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: SC District: 03

Date of Disbursement 07' 06' 2012

Amount of Each Disbursement this Period
, , 20.50

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y

Amount of Each Disbursement this Period
, , ,

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y

Amount of Each Disbursement this Period
, , ,

SUBTOTAL of Disbursements This Page (optional)..... , , 20.50

TOTAL This Period (last page this line number only)..... , 3,695.66

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SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 1 OF 1
FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
Committee to elect Brian Ryan B. Doyle

LOAN SOURCE Full Name (Last, First, Middle Initial)
Brian L. Doyle

Mailing Address
P.O. Box 1391

Election:
 Primary
 General
 Other (specify) ▼

City
Greenwood State
SC ZIP Code
29646

Original Amount of Loan
3,848.26 Cumulative Payment To Date
.00 Balance Outstanding at Close of This Period
15,496.81

TERMS Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y . % (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)..... ▶ , , .

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.

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SCHEDULE C-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
 Information found on
 Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER C	
LENDING INSTITUTION (LENDER) Full Name	Amount of Loan _____, _____, _____	Interest Rate (APR) _____%	
Mailing Address	Date Incurred or Established	M M / D D / Y Y Y Y	
City State Zip Code	Date Due	M M / D D / Y Y Y Y	
A. Has loan been restructured? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred			
B. If line of credit, Amount of this Draw: _____ Total Outstanding Balance: _____			
C. Are other parties secondarily liable for the debt incurred? <input type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Schedule C.)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the value of this collateral? _____ Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? _____	
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: _____		Location of account: Address: City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Signature		DATE M M / D D / Y Y Y Y	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Signature		DATE M M / D D / Y Y Y Y	
Title			

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SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE	OF
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9

NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period	Payment This Period	Outstanding Balance at Close of This Period
, , .	, , .	, , .
Amount Incurred This Period		
, , .		

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period	Payment This Period	Outstanding Balance at Close of This Period
, , .	, , .	, , .
Amount Incurred This Period		
, , .		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period	Payment This Period	Outstanding Balance at Close of This Period
, , .	, , .	, , .
Amount Incurred 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)	▶	, , .

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FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full)		Report Covering Period:				
		From:		To:		
		M M / D D / Y Y Y Y		M M / D D / Y Y Y Y		
Committee Name				(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees	
A						
B	Column Total Last Page Only.....					
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A						
B						
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A						
B						
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A						
B						
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A						
B						
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A						
B						

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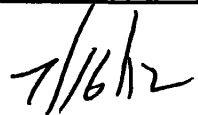
Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input checked="" type="checkbox"/> USPS Priority Mail	Postmarked 7/10/12
Delivery Confirmation™ or Signature Confirmation™ Label <input checked="" type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked



PREPARER

(3/2005)



DATE PREPARED

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