10/27/2020 16:40

Image# 202010279336592724 PAGE 1/2

## 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 PERDUE FOR							]		
ADDRESS (number and stree	et) PO BOX 12077						1		
CITY STATE ATLANTA GA			STATE GA	ZIP CODE		-			
2. NAME OF CANDIDATE			GA	30355  3. OFFICE SOUGHT (State and District)			4. FEC IDENTIFICATION	NIIMBER	
PERDUE, DAVID, A	۸., ,			Senate	•	GA 00	C00547570		
5. ISTHIS AN AMENDMENT?	NO, THIS IS A I	NEW FILING		YES, IT AME	NDS THE	NOTICE FILED ON			
A. FULL NAME AKERS, SCOTT, , ,				Name of Employer RETIRED			Date (month, day, year)	Amount	
MAILING ADDRESS 3600 TUXEDO ROAD NORTHWEST				Transaction ID : F6.181218			10/25/2020	1000.00	
CITY	STATE	ZIP CO	DDE	Occupation			_		
ATLANTA	GA	3030		RETIRED					
B. FULL NAME BEAGHEN, MICHAEL, , ,				Name of Employer US CENSUS BUREAU			Date (month, day, year)	Amount	
MAILING ADDRESS							10/25/2020	2000.00	
6631 WAKEFIELD DR				Transaction	ID : F6.	181216			
CITY STATE ZIP CODE		DDE	Occupation						
ALEXANDRIA	VA	2230	)7	STATISTICIAN					
C. FULL NAME				Name of Employer BUSINESS ROUNDTABLE			Date (month,	Amount	
BOLTEN, JOSH	IUA, , ,			BUSINESS	ROUNL	TABLE	day, year)		
MAILING ADDRESS 4715 CUMBERLAND AVE				Transaction ID : F6.181211			10/25/2020	2800.00	
CITY	STATE	ZIP CO	DDE	Occupation					
CHEVY CHASE	MD	2081	5	TRADE ASSOCIATION EXECUTIVE					
D. FULL NAME COHEN, SHERRYL, , ,				Name of Employer HOMEMAKER			Date (month, day, year)	Amount	
MAILING ADDRESS 680 SALEM END RD				_			10/25/2020	2500.00	
660 SALEW END RD				Transaction	ID : F6.	181217			
CITY	STATE	ZIP CO	DDE	Occupation HOMEMAKER					
FRAMINGHAM	MA	0170	02						
E. FULL NAME REYNOLDS, MICHAEL, , ,				Name of Employer SELF-EMPLOYED			Date (month, day, year)	Amount	
MAILING ADDRESS 18562 TOPANGA CANYON ROAD				Transaction ID : F6.181213			10/25/2020	1000.00	
CITY	STATE ZIP CODE		DDE	Occupation			-		
SILVERADO	CA	9267	76	ATTORNEY					
SIGNATURE (optional) CRATE, BRADLEY, , ,	'	1		[Electronically	Filed]	<b>DATE</b> 10/27/2020	Federal Ele 999 E Street, NW,	formation contact: ction Commission Washington, DC 20463 530, Local 202-694-1100	



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## 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 PERDUE FOR SENATE		1	
ADDRESS (number and street) PO BOX 12077		-	
10 BOX 12011		1	
CITY, STATE, and ZIP CODE			n nogo
ATLANTA	GA 30355	continuation	
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATIO	N NUMBER
PERDUE, DAVID, A., ,	Senate GA 00	C00547570	
5. IS THIS AN AMENDMENT? NO, THIS IS A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON	/	<i></i>
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
UIHLEIN, LUCIA, , ,	RETIRED	day, year)	
		10/25/2020	1000.00
715 LANDS END DR	Transaction ID - EC 494244		
	Transaction ID : F6.181214 Occupation		
LONGBOAT KEY FL 34228	RETIRED		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
		day, you.	
	Occupation		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
		day, year)	
	Occupation		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
		,, ,,	
	Occupation		