

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))....	<input type="text" value="593143.77"/>	<input type="text" value="1391942.16"/>
(b) Total Contribution Refunds (from Line 20(d))	<input type="text" value="1000"/>	<input type="text" value="3700"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	<input type="text" value="592143.77"/>	<input type="text" value="1388242.16"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<input type="text" value="441468.33"/>	<input type="text" value="2309442.09"/>
(b) Total Offsets to Operating Expenditures (from Line 14).....	<input type="text" value=""/>	<input type="text" value="550"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	<input type="text" value="441468.33"/>	<input type="text" value="2308892.09"/>
8. Cash on Hand at Close of Reporting Period (from Line 27).....	<input type="text" value="27068.52"/>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value=""/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="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: / / To: / /

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2014"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2014"/> (date after general election) through <input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="93639"/>	<input type="text" value="1024427"/>	<input type="text" value="8570"/>
(ii) Unitemized		
<input type="text" value="11821"/>	<input type="text" value="71813"/>	<input type="text" value="1925"/>
(iii) Total of contributions from individuals		
<input type="text" value="105460"/>	<input type="text" value="1096240"/>	<input type="text" value="10495"/>
(b) Political Party Committees		
<input type="text"/>	<input type="text"/>	<input type="text"/>
(c) Other Political Committees		
<input type="text" value="47250"/>	<input type="text" value="218240.65"/>	<input type="text" value="19500"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 146

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	1095000	
(b) All Other Loans		
(c) TOTAL LOANS (add Lines 13(a) and (b))		
270000	1095000	
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	2496781.38	470428.77

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 146

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)

PAGE 6 / 146

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

1000	3700	
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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 146
	<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
 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
 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
 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 146
	<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 146
	<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. Mrs. Kay K Allen		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2014
Mailing Address 4897 Hereford Farm Rd		Transaction ID : SA11Ai-CN4409
City Evans	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400
Name of Employer Columbia County	Occupation Elected Official	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1400	

Full Name (Last, First, Middle Initial) B. J.T. Anderson Jr		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 24 / 2014
Mailing Address 949 Johns Rd		Transaction ID : SA11Ai-CN4289
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) C. Jim Anderson		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 04 / 2014
Mailing Address P O Box 732		Transaction ID : SA11Ai-CN4445
City Statesboro	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Forest Heights Water Works	Occupation Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300	

SUBTOTAL of Receipts This Page (optional).....	1000.00
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 10 OF 146
	<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 146
	<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 146
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
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 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 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 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 146
	<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)
Judy P. Booker

Mailing Address P.O. Box 30172

City State Zip Code
Sea Island GA 31561

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
1000

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

Transaction ID : SA11Ai-CN4229

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Mr. Grier C Bovard

Mailing Address 2918 Lake Forest Dr

City State Zip Code
Augusta GA 30909

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

Name of Employer Occupation
Augusta Iron & Steel Works Inc. Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000

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

Transaction ID : SA11Ai-CN4448

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Dr. Robert L Brand

Mailing Address PO Box 14039

City State Zip Code
Augusta GA 30919

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

Name of Employer Occupation
Augusta Orthopedic and Sports Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700

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

Transaction ID : SA11Ai-CN4488

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 14 OF 146
	<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) Bennie Bray		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2014
Mailing Address 8214 Westchester Dr Apt 800		Transaction ID : SA11Ai-CN4236
City Dallas	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Self	Occupation Investments	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

Full Name (Last, First, Middle Initial) Stephanie Bray		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2014
Mailing Address 8214 Westchester Dr Apt 800		Transaction ID : SA11Ai-CN4237
City Dallas	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
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 2600	

Full Name (Last, First, Middle Initial) Dr. James H. Braziel III		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2014
Mailing Address 919 Walke Dairy Road		Transaction ID : SA11Ai-CN4264
City Dublin	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Middle GA Anesthesia Assoc.	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).....	5450.00
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 15 OF 146
	<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 146
	<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 146
	<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 146
	<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. Eddie Cheeks		Date of Receipt M M / D D / Y Y Y Y 11 / 11 / 2014	
Mailing Address 85 Conifer Circle		Transaction ID : SA11Ai-CN4520	
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 Self	Occupation Physician		
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		

Full Name (Last, First, Middle Initial) B. J. Samuel Choate Jr		Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2014	
Mailing Address 103 Spyglass		Transaction ID : SA11Ai-CN4366	
City St Simons Island	State GA	Zip Code 31522	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000	
Name of Employer Atwood Law Firm P.C.	Occupation Attorney		
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. J.R. Cleveland		Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2014	
Mailing Address P.O. Box 2958		Transaction ID : SA11Ai-CN4376	
City Gainesville	State GA	Zip Code 30503	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500	
Name of Employer Gainesville Milling	Occupation Executive		
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).....	2000.00
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 146
	<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: 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: 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: 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 146
	<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)
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 146
	<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)
Stephen R. Croft

Mailing Address 7023 Banbury Way

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 **250**

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

Transaction ID : SA11Ai-CN4303

Amount of Each Receipt this Period
150

B. 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

C. 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

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 146
	<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)
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

B. 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
10 / 27 / 2014

Transaction ID : SA11Ai-CN4370

Amount of Each Receipt this Period
250

C. 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
10 / 22 / 2014

Transaction ID : SA11Ai-CN4244

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 146
	<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)
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

B. 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

C. 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

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 24 OF 146
	<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)
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
10 / 21 / 2014

Transaction ID : SA11Ai-CN4232

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Roy T. Gamble II

Mailing Address 305 Johns Way

City Augusta State GA Zip Code 30907

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-CN4314

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Ms. Donna Gann

Mailing Address 290 Village Parkway

City North Augusta State SC Zip Code 29841

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

Name of Employer Windsor Jewelers Occupation Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

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

Transaction ID : SA11Ai-CN4449

Amount of Each Receipt this Period
1500

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

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

4600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 146
	<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. Charles B. Ginden

Mailing Address 866 Carlton Ridge

City Atlanta State GA Zip Code 30342

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 **1500**

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

Transaction ID : SA11Ai-CN4425

Amount of Each Receipt this Period
500

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 **310**

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

Transaction ID : SA11Ai-CN4158

Amount of Each Receipt this Period
10

C. 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 Y Y
11 / 04 / 2014

Transaction ID : SA11Ai-CN4444

Amount of Each Receipt this Period
25

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 26 OF 146
	<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. 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

B. 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
 10 / 21 / 2014

Transaction ID : SA11Ai-CN4228

Amount of Each Receipt this Period
1000

C. 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
 10 / 21 / 2014

Transaction ID : SA11Ai-CN4221

Amount of Each Receipt this Period
300

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 27 OF 146
	<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. Bert Guy		Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 106 E Weed Street		Transaction ID : SA11Ai-CN4364
City St. Marys	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Georiga Republican Party	Occupation First Vice-Chairman	
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. Hugh L. Hamilton Jr		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 3 Eagleton Ct		Transaction ID : SA11Ai-CN4491
City Augusta	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Genesis Health LLC	Occupation Executive	
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. Mrs. Molly A Hargather		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 1915 Claremont St		Transaction ID : SA11Ai-CN4468
City Atlanta	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150
Name of Employer Unboundary	Occupation Account Assistant	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650	

SUBTOTAL of Receipts This Page (optional).....	1650.00
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 28 OF 146
	<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)
Sue Harrison

Mailing Address 3700 Baldee Road

City State Zip Code
Bartow GA 30413

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
500

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		29		2014

Transaction ID : SA11Ai-CN4391

Amount of Each Receipt this Period
500

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

Mailing Address 424 Wateroak Ln

City State Zip Code
Augusta 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
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

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

Mailing Address 14 Magnolia Drive

City State Zip Code
Newnan GA 30263

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

Name of Employer Occupation
Headley Construction Corp. 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

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

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

3600.00

**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 146
	<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 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 Y Y
 11 / 01 / 2014

Transaction ID : SA11Ai-CN4424

Amount of Each Receipt this Period
250

B. 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 Y Y
 10 / 16 / 2014

Transaction ID : SA11Ai-CN4155

Amount of Each Receipt this Period
500

C. 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 Y Y
 10 / 27 / 2014

Transaction ID : SA11Ai-CN4357

Amount of Each Receipt this Period
100

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 30 OF 146
	<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 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

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

Mailing Address P.O. Box 2627

City Statesboro State GA Zip Code 30459

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

Name of Employer Northland Communications Corp. Occupation Cable TV Executive

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-CN4459

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. Ron G. Johnson

Mailing Address 888 Golf Drive

City Swainsboro State GA Zip Code 30401

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

Name of Employer INVEST Financial Corporation Occupation Representative

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

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

Transaction ID : SA11Ai-CN4477

Amount of Each Receipt this Period
100

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 31 OF 146
	<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)
Terri Jondahl

Mailing Address 6009 Lanier Heights Circle

City Buford State GA Zip Code 30518

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

Name of Employer CAB Incorporated 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
 10 / 20 / 2014

Transaction ID : SA11Ai-CN4193

Amount of Each Receipt this Period
250

B. 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
 11 / 04 / 2014

Transaction ID : SA11Ai-CN4471

Amount of Each Receipt this Period
250

C. 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
 11 / 04 / 2014

Transaction ID : SA11Ai-CN4470

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 32 OF 146
	<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)
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
10 / 29 / 2014

Transaction ID : SA11Ai-CN4389

Amount of Each Receipt this Period
150

B. 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

C. 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

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

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

849.00

**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 146	
	<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)
Ken Kummer

Mailing Address 27281 Lakeway Court

City State Zip Code
Bonita Springs FL 34134

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

Name of Employer Occupation
AF Inc. Mfg

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-CN4393

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Adam Lane

Mailing Address 389 West Meadowlake Parkway

City State Zip Code
Swainsboro GA 30401

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

Name of Employer Occupation
Self Farmer

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
11 / 04 / 2014

Transaction ID : SA11Ai-CN4461

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Donald M. Leebern Jr.

Mailing Address PO Box 308

City State Zip Code
Mcdonough GA 30243

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

Name of Employer Occupation
Georgia Crown Chairman

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

Election Cycle-to-Date
4600

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

Transaction ID : SA11Ai-CN4390

Amount of Each Receipt this Period
2000

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 146
	<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)
Francois Paul Leger

Mailing Address 478 Front St

City North Augusta State SC Zip Code 29841

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

Name of Employer FPL Food LLC Occupation CEO President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4100**

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

Transaction ID : SA11Ai-CN4177

Amount of Each Receipt this Period
 1000

B. 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

C. 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

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 35 OF 146
	<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)
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 Y Y
10 / 24 / 2014

Transaction ID : SA11Ai-CN4266

Amount of Each Receipt this Period
2000

B. 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 Y Y
11 / 19 / 2014

Transaction ID : SA11Ai-CN4543

Amount of Each Receipt this Period
250

C. 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 Y Y
10 / 24 / 2014

Transaction ID : SA11Ai-CN4285

Amount of Each Receipt this Period
500

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 146
	<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)
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 M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

Transaction ID : SA11Ai-CN4374

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. Mark T Maund

Mailing Address 2306 William Street

City Augusta	State GA	Zip Code 30904
-----------------	-------------	-------------------

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

Name of Employer CTB Wealth Management Services LLC	Occupation Principal
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2014

Transaction ID : SA11Ai-CN4248

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Dr. Thomas R McArthur

Mailing Address 300 Commerce Way

City Vidalia	State GA	Zip Code 30474
-----------------	-------------	-------------------

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

Name of Employer Altamaha Animal Clinic	Occupation Veterinarian
--	----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt

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

Transaction ID : SA11Ai-CN4489

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 37 OF 146	
	<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

Full Name (Last, First, Middle Initial) A. Samuel G. McCachern		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2014
Mailing Address 116 West Gaston Street		Transaction ID : SA11Ai-CN4375
City Savannah	State GA	
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	

Full Name (Last, First, Middle Initial) B. Mr. Ben McElreath		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 24 / 2014
Mailing Address 51 Conifer Cir		Transaction ID : SA11Ai-CN4307
City Augusta	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Benjamin F. McElreath PC	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2250	

Full Name (Last, First, Middle Initial) C. Mr. Ben McElreath		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 04 / 2014
Mailing Address 51 Conifer Cir		Transaction ID : SA11Ai-CN4469
City Augusta	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Benjamin F. McElreath PC	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 38 OF 146
	<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. 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

B. 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

C. 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

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 39 OF 146
	<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. Victor J Mills		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address 736 Jones Creek		Transaction ID : SA11Ai-CN4278	
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 Blanchard & Calhoun	Occupation Real Estate		
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) B. Diane Morgan		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address 756 Riverbluff Rd		Transaction ID : SA11Ai-CN4293	
City North Augusta	State SC	Zip Code 29841	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50	
Name of Employer R. W. Allen LLC	Occupation Executive Assistant		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550		

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth S. Morgan		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 3 Somerset Ct		Transaction ID : SA11Ai-CN4417	
City Augusta	State GA	Zip Code 30909	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50	
Name of Employer Self	Occupation Medical Sales		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300		

SUBTOTAL of Receipts This Page (optional).....	1100.00
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 40 OF 146
	<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 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
10 / 24 / 2014

Transaction ID : SA11Ai-CN4315

Amount of Each Receipt this Period
300

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

Mailing Address P.O. Box 9

City Glennville State GA Zip Code 30427

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

Name of Employer Information Requested
Occupation Information Requested

Rotary Corporation
President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

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

Transaction ID : SA11Ai-CN4465

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Martin W. Nesmith

Mailing Address 4400 Perry Road

City Claxton State GA Zip Code 30417

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

Name of Employer Information Requested
Occupation Information Requested

Nesmith Chevrolet
Dealer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

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

Transaction ID : SA11Ai-CN4421

Amount of Each Receipt this Period
250

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 41 OF 146
	<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)
Jean S. Nix

Mailing Address 40 Jones Mill Drive

City State Zip Code
Carrollton GA 30116

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

Name of Employer Occupation
Nix Fowler Constructors Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750

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

Transaction ID : SA11Ai-CN4178

Amount of Each Receipt this Period
250

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

Mailing Address 528 McKinnie's Line

City State Zip Code
Evans GA 30809

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
500

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

Transaction ID : SA11Ai-CN4288

Amount of Each Receipt this Period
500

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

Mailing Address 3126 Montpelier Dr

City State Zip Code
Augusta GA 30909

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

Name of Employer Occupation
GIW CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

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

Transaction ID : SA11Ai-CN4218

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 42 OF 146
	<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)
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
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11Ai-CN4260

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Whitney O'Keeffe

Mailing Address 1002 Katherine Street No. 9

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 **600**

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

Transaction ID : SA11Ai-CN4154

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
R. Glen Owen

Mailing Address 3417 Woodstone Place

City Augusta State GA Zip Code 30909

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 **1100**

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

Transaction ID : SA11Ai-CN4437

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 43 OF 146
	<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)
Karl Owens

Mailing Address 100 SW Main Street

City: Vidalia State: GA Zip Code: 30474

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

Name of Employer: Owens Construction Occupation: President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 10 / 24 / 2014

Transaction ID : SA11Ai-CN4316

Amount of Each Receipt this Period: 500

B. 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 Wayndesboro 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

C. 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

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: PAGE 44 OF 146
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
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
 M M / D D / Y Y Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11Ai-CN4473

Amount of Each Receipt this Period
100

B. 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

C. 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

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

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

1200.00

**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 146
	<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 Rahaim

Mailing Address 2115 Glenn Fls

City State Zip Code
Grovetown GA 30813

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
300

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

Transaction ID : SA11Ai-CN4380

Amount of Each Receipt this Period
60

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

Mailing Address 6932 Eldridge Street

City State Zip Code
San Diego CA 92120

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

Name of Employer Occupation
KAB Laboratories Inc. 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

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

Mailing Address 3539 Westlake Dr

City State Zip Code
Augusta GA 30907

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

Name of Employer Occupation
Powerline Inc. 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

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

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

2060.00

**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 146
	<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. Tim H Reeve

Mailing Address 493 Falcon Dr

City State Zip Code
Martinez GA 30907

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

Name of Employer Occupation
Lakeside High School 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

B. Full Name (Last, First, Middle Initial)
Lois R. Regan

Mailing Address 4189 Crosstowne Ct

City State Zip Code
Evans GA 30809

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
1000

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

Transaction ID : SA11Ai-CN4291

Amount of Each Receipt this Period
1000

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

Mailing Address 5 Reid Court

City State Zip Code
Augusta GA 30909

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

Name of Employer Occupation
The Boardroom 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 / 28 / 2014

Transaction ID : SA11Ai-CN4383

Amount of Each Receipt this Period
250

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

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

1770.00

**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 146
	<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 P. Richards

Mailing Address 4 Bent Tree Ct

City Augusta State GA Zip Code 30909

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

Name of Employer Bob Richards Auto Group Occupation Auto Dealer

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 / 10 / 2014

Transaction ID : SA11Ai-CN4512

Amount of Each Receipt this Period
500

B. 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
 M M / D D / Y Y Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11Ai-CN4407

Amount of Each Receipt this Period
1000

C. 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
 M M / D D / Y Y Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11Ai-CN4308

Amount of Each Receipt this Period
250

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 48 OF 146
	<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)
John W. Robinson Jr

Mailing Address P.O. Box E

City State Zip Code
Winder GA 30680

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
500

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

Transaction ID : SA11Ai-CN4365

Amount of Each Receipt this Period
500

B. 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
 11 / 04 / 2014

Transaction ID : SA11Ai-CN4466

Amount of Each Receipt this Period
1000

C. 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
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4304

Amount of Each Receipt this Period
200

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 49 OF 146
	<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)
W. Greg Ryberg

Mailing Address Post Office Box 1077

City Aiken State SC Zip Code 29802

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 **1500**

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

Transaction ID : SA11Ai-CN4290

Amount of Each Receipt this Period
500

B. 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
10 / 24 / 2014

Transaction ID : SA11Ai-CN4275

Amount of Each Receipt this Period
50

C. 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
11 / 04 / 2014

Transaction ID : SA11Ai-CN4463

Amount of Each Receipt this Period
500

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 50 OF 146
	<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)
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

B. 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

C. 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

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

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

1600.00

**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 146
	<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. 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
11 / 10 / 2014

Transaction ID : SA11Ai-CN4509

Amount of Each Receipt this Period
250

B. 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

C. 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

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 52 OF 146
	<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. 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 Y Y
 10 / 18 / 2014

Transaction ID : SA11Ai-CN4175

Amount of Each Receipt this Period
 100

B. 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 Y Y
 10 / 21 / 2014

Transaction ID : SA11Ai-CN4213

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 **350**

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

Transaction ID : SA11Ai-CN4358

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 53 OF 146
	<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. John Sours

Mailing Address 2558 Oakwood Trace SE

City State Zip Code
Smyrna GA 30080

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

Name of Employer Occupation
State Of Georgia Administrator

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 / 31 / 2014

Transaction ID : SA11Ai-CN4436

Amount of Each Receipt this Period
100

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

Mailing Address 2 Pettigrew Plantation Road

City State Zip Code
Bluffton SC 29910

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

Name of Employer Occupation
South University Educator

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
11 / 04 / 2014

Transaction ID : SA11Ai-CN4496

Amount of Each Receipt this Period
500

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

Mailing Address 50 Cinema Lane

City State Zip Code
Saint Simons Island GA 31522

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

Name of Employer Occupation
Georgia Theatre Company President

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-CN4362

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 54 OF 146
	<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)
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

B. 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
 10 / 24 / 2014

Transaction ID : SA11Ai-CN4313

Amount of Each Receipt this Period
 200

C. 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
 10 / 30 / 2014

Transaction ID : SA11Ai-CN4433

Amount of Each Receipt this Period
 25

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 55 OF 146
	<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)
Carey Tankersley

Mailing Address PO Box 211515

City State Zip Code
Martinez GA 30917

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

Name of Employer Occupation
State Farm Insurance 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

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

Mailing Address P.O. Box 269

City State Zip Code
Sandersville GA 31082

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

Name of Employer Occupation
Sandersville Railroad 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

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

Mailing Address 2981 Grey Moss Pass

City State Zip Code
Duluth GA 30097

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

Name of Employer Occupation
American Painting And Renovation 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

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 56 OF 146
	<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)
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

B. 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

C. 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

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

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

550.00

**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 146
	<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)
Hiram Thompson

Mailing Address 1019 Emerald Pl

City State Zip Code
Evans GA 30809

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

Name of Employer Occupation
Thompson Wrecking Company President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2950

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

Transaction ID : SA11Ai-CN4187

Amount of Each Receipt this Period
100

B. 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
10 / 24 / 2014

Transaction ID : SA11Ai-CN4296

Amount of Each Receipt this Period
100

C. 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
10 / 31 / 2014

Transaction ID : SA11Ai-CN4415

Amount of Each Receipt this Period
500

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 58 OF 146
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

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

Mailing Address 2633 Raymond Avenue

City Augusta State GA Zip Code 30904

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

Name of Employer Blanchard & Calhoun Occupation 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

B. 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 Y Y
 10 / 28 / 2014

Transaction ID : SA11Ai-CN4381

Amount of Each Receipt this Period
1000

C. 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 Y Y
 10 / 22 / 2014

Transaction ID : SA11Ai-CN4246

Amount of Each Receipt this Period
1000

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 59 OF 146
	<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)
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

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

Mailing Address 3825 Inverness Way

City Martinez 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 **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

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

Mailing Address 445 Walker Street

City Augusta State GA Zip Code 30901

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 **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

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

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

900.00

**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 146
	<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. R. Daniel Weigle

Mailing Address 1 Summitt Pl

City Augusta State GA Zip Code 30909

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 **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

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

Mailing Address 250 Wagon Road

City Sylvania State GA Zip Code 30467

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

Name of Employer Medicap Pharmacy Occupation 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

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

Mailing Address 1122 Johns Rd

City Augusta State GA Zip Code 30904

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

Name of Employer Augusta ENT Occupation 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

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 61 OF 146
	<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. Bunny Simon Williams

Mailing Address 5 Indian Creek Rd

City Augusta State GA Zip Code 30909

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

Name of Employer Trinity Hospital Of Augusta Occupation 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 Y Y
11 / 20 / 2014

Transaction ID : SA11Ai-CN4545

Amount of Each Receipt this Period
1000

B. 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

C. 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

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

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

1600.00

**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 146
	<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)
John M. Worley Jr

Mailing Address 1143 Putter Path

City State Zip Code
Orangeburg SC 29118

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

Name of Employer Occupation
Zeus Industrial Products 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

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

Mailing Address 2187 Brooview Dr NW

City State Zip Code
Atlanta GA 30318

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

Name of Employer Occupation
Surety South LLC 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

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).....

2800.00

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 63 OF 146	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" 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)
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 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 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 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 64 OF 146
	<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 65 OF 146
	<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. ExxonMobil PAC

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
 11 / 24 / 2014

Transaction ID : SA11C-CN4562

Amount of Each Receipt this Period
 2500

B. Fluor Corporation Political Action Committee

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
 11 / 24 / 2014

Transaction ID : SA11C-CN4561

Amount of Each Receipt this Period
 2500

C. Fund for America's Future

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
 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 66 OF 146
	<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 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 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 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: PAGE 67 OF 146
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

A. Full Name (Last, First, Middle Initial)
Jackson for Senate

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. Full Name (Last, First, Middle Initial)
Kevin McCarthy For Congress

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. Full Name (Last, First, Middle Initial)
LYNN PAC

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 68 OF 146
	<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 M / D 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 M / D 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 M / D 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 69 OF 146
	<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

Full Name (Last, First, Middle Initial) A. Speak Up America PAC		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address PO Box 2485		Transaction ID : SA11C-CN4401
City Springfield	State VA	Zip Code 22152
FEC ID number of contributing federal political committee. C C00376756	Amount of Each Receipt this Period 1000	
Name of Employer	Occupation	
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. The Loose Group		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 3379 Peachtree Road Suite 270		Transaction ID : SA11C-CN4234
City Atlanta	State GA	Zip Code 30326
FEC ID number of contributing federal political committee. C C00010793	Amount of Each Receipt this Period 5000	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000	

Full Name (Last, First, Middle Initial) C. The National Right To Work Committee PAC		Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 8001 Braddock Road Ste 500		Transaction ID : SA11C-CN4372
City Springfield	State VA	Zip Code 22151
FEC ID number of contributing federal political committee. C C00395533	Amount of Each Receipt this Period 1000	
Name of Employer	Occupation	
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).....	7000.00
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 70 OF 146
	<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

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

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

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 71 OF 146
	<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 72 OF 146
	<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

Full Name (Last, First, Middle Initial) Richard W Allen		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 24 / 2014
Mailing Address 2237 Pickens Rd		Transaction ID : SA11D-CN4555
City Augusta	State GA Zip Code 30904	
FEC ID number of contributing federal political committee. C H2GA12121		Amount of Each Receipt this Period 440433.77
Name of Employer RW Allen And Associates	Occupation President	Conversion of Loan to Contribution
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 440433.77	

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y Y
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)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y Y
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).....	440433.77
TOTAL This Period (last page this line number only).....	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 73 OF 146
	<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

A. Full Name (Last, First, Middle Initial)
Richard 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 Self Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
110000

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

Transaction ID : SA13a-LN1018

Amount of Each Receipt this Period
110000

Personal Funds

B. Full Name (Last, First, Middle Initial)
Richard 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 Self Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
160000

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

Transaction ID : SA13a-LN1019

Amount of Each Receipt this Period
160000

Personal Funds

C. Full Name (Last, First, Middle Initial)
Richard 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 Self Occupation Candidate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
125000

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 25 / 2014

Transaction ID : SA13a-LN1020

Amount of Each Receipt this Period
125000

Personal Funds

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

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

395000.00

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 74 OF 146	
	<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. 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	Analysis 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) General 2014			
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	Reporting Software	
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) General 2014			
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	Net Salary	
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) General 2014			
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 75 OF 146	
	<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. Lauren Swing

Full Name (Last, First, Middle Initial)
Mailing Address 807 Saint Andrews Drive

City Augusta State GA Zip Code 30909

Purpose of Disbursement Reimbursement: 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 / 11 / 2014

Amount of Each Disbursement this Period: 426.73

Transaction ID : SB17-EX3924

Reimbursement: See Below

B. Deano's Italian Grill

Full Name (Last, First, Middle Initial)
Mailing Address 110 W. Jackson Street

City Dublin State GA Zip Code 31021

Purpose of Disbursement Bus Tour Food

Candidate Name

Office Sought: House Senate President

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

State: District:

Date of Disbursement: 11 / 11 / 2014

Amount of Each Disbursement this Period: 293.72

Transaction ID : SB17-EX3925

[MEMO ITEM]
Bus Tour Food

c. Office Depot

Full Name (Last, First, Middle Initial)
Mailing Address 1117 Knox Ave

City North Augusta State SC Zip Code 29841

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought: House Senate President

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

State: District:

Date of Disbursement: 11 / 11 / 2014

Amount of Each Disbursement this Period: 15.43

Transaction ID : SB17-EX3926

[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 76 OF 146			
	<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) General 2014	
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 77 OF 146			
	<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	
Candidate Name		Transaction ID : SB17-EX3921
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	
Candidate Name		Transaction ID : SB17-EX3922
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	
Candidate Name		Transaction ID : SB17-EX3923
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 78 OF 146			
	<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) General 2014	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) General 2014	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 79 OF 146	
	<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	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX3842
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) General 2014	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 / 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	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX3843
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) General 2014	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 / 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	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX3844
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) General 2014	Credit Card Service Fee
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 80 OF 146			
	<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	
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) General 2014		
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	
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) General 2014		
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	
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) General 2014		
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 81 OF 146			
	<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 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	Transaction ID : SB17-EX3858	
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) General 2014			
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	Transaction ID : SB17-EX3859	
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) General 2014			
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	Transaction ID : SB17-EX3860	
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) General 2014			
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 82 OF 146	
	<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
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3861
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	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 / 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
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3911
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	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 / 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
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3862
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	Credit Card Service Fee
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 83 OF 146			
	<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	Transaction ID : SB17-EX3912
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) General 2014		
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	Transaction ID : SB17-EX3863
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) General 2014		
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	Transaction ID : SB17-EX3867
Purpose of Disbursement Chargeback Fee		Category/Type 001	
Candidate Name			Chargeback 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) General 2014		
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 84 OF 146			
	<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 / 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
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX3913	
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	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 25.82
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX3908	
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	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 / 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
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX3910	
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	Credit Card Service Fee
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 85 OF 146			
	<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 59.26	
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) General 2014			
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) General 2014			
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) General 2014			
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 86 OF 146			
	<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		Candidate Name	Transaction ID : SB17-EX3918
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		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		Candidate Name	Transaction ID : SB17-EX3920
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		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		Candidate Name	Transaction ID : SB17-EX3946
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		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 87 OF 146	
	<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	Transaction ID : SB17-EX3947
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	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	Transaction ID : SB17-EX3949
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	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	Transaction ID : SB17-EX3944
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	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 88 OF 146			
	<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	Transaction ID : SB17-EX3854
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	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	Transaction ID : SB17-EX3864
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	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	Transaction ID : SB17-EX3865
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	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 89 OF 146			
	<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	Category/ Type 001	
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) General 2014	Net Salary
State: District:		

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	Category/ Type 001	
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	Net Salary
State: District:		

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	Category/ Type 001	
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	Payroll Service
State: District:		

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 90 OF 146			
	<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. 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	Transaction ID : SB17-EX3849		
Purpose of Disbursement Reimbursement: See Below		Category/ Type 001	Reimbursement: See Below		
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) General 2014				
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 165.00		
City Langley	State SC	Zip Code 29834	Transaction ID : SB17-EX3850		
Purpose of Disbursement Mileage		Category/ Type 001	[MEMO ITEM] Mileage		
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) General 2014				
State: District:					

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	Transaction ID : SB17-EX3851		
Purpose of Disbursement Event Supplies		Category/ Type 001	[MEMO ITEM] Event Supplies		
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) General 2014				
State: District:					

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 91 OF 146			
	<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	Category/Type 001	Transaction ID : SB17-EX3853
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) General 2014	[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	Category/Type 001	Transaction ID : SB17-EX3876
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) General 2014	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	Category/Type 001	Transaction ID : SB17-EX3939
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	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 92 OF 146			
	<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 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	Email Marketing
State: District:		

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	Email Marketing
State: District:		

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	Email Marketing
State: District:		

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 93 OF 146	
	<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) General 2014	
State: District:	Email Marketing	

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) General 2014	
State: District:	Transaction Fee	

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) General 2014	
State: District:	Credit Card Paid by Card Services Center	

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 94 OF 146			
	<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	
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 Supplies
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	
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 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	
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 95 OF 146			
	<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	Transaction ID : SB17-EX3884
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 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	Transaction ID : SB17-EX3885
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] 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	Transaction ID : SB17-EX3886
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 96 OF 146			
	<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	[MEMO ITEM] Office Supplies
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	
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	[MEMO ITEM] Toner Cartridges
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	
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	[MEMO ITEM] Postage
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	
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 146			
	<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: 2014
 Primary General
 Other (specify) General 2014

State: District:

Date of Disbursement: 10 / 31 / 2014

Amount of Each Disbursement this Period: 22.43

Transaction ID : SB17-EX3890

[MEMO ITEM]
Event Supplies

B. Enmark

Full Name (Last, First, Middle Initial)
Mailing Address 100 Northside Drive W

City Statesboro State GA Zip Code 30458

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: 84.50

Transaction ID : SB17-EX3891

[MEMO ITEM]
Fuel

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: 2014
 Primary General
 Other (specify) General 2014

State: District:

Date of Disbursement: 10 / 31 / 2014

Amount of Each Disbursement this Period: 89.62

Transaction ID : SB17-EX3892

[MEMO ITEM]
Office Supplies

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 146			
	<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 99 OF 146			
	<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. 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		001
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	
State:	District:	

Transaction ID : SB17-EX3896
[MEMO ITEM]
Event Catering

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		001
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	
State:	District:	

Transaction ID : SB17-EX3897
[MEMO ITEM]
Event Costs

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		001
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	
State:	District:	

Transaction ID : SB17-EX3898
[MEMO ITEM]
Event Costs

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 146	
	<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 101 OF 146	
	<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	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3902
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	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3903
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	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX3904
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 102 OF 146			
	<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	
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] Yard Sign Supplies
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	
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	Credit Card Paid by Card Services Center
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	
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:		

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 103 OF 146	
	<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)
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

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 104 OF 146	
	<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	[MEMO ITEM] Office Supplies
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	
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	[MEMO ITEM] Postage
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	
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	[MEMO ITEM] Office Supplies
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	
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 105 OF 146			
	<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 11 / 10 / 2014
Mailing Address 235 Robert C Daniel Junior Parkwa		Amount of Each Disbursement this Period 15.60
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3977
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	[MEMO ITEM] Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) B. Enmark		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 217 US Highway 25 N		Amount of Each Disbursement this Period 54.54
City Millen	State GA	
Zip Code 30442	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3978
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	[MEMO ITEM] Fuel
State: District:		

Full Name (Last, First, Middle Initial) c. Krispy Kreme Doughnuts		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 2866 Washington Road		Amount of Each Disbursement this Period 10.93
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3979
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	[MEMO ITEM] Food for Volunteers
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 146			
	<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. 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 107 OF 146	
	<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) General 2014	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	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	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 108 OF 146			
	<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
City Waynesboro	State GA	Zip Code 30830	Transaction ID : SB17-EX3874
Purpose of Disbursement Net Salary		Category/ Type 001	
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	Net Salary
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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
City Waynesboro	State GA	Zip Code 30830	Transaction ID : SB17-EX3937
Purpose of Disbursement Net Salary		Category/ Type 001	
Candidate Name		Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Net Salary
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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
City Augusta	State GA	Zip Code 30909	Transaction ID : SB17-EX3871
Purpose of Disbursement Net Salary		Category/ Type 001	
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	Net Salary
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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 109 OF 146	
	<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	Transaction ID : SB17-EX3934
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	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	Transaction ID : SB17-EX3836
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) General 2014	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	Transaction ID : SB17-EX3848
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) General 2014	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 110 OF 146	
	<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		Transaction ID : SB17-EX3916
Purpose of Disbursement Event Turnout Calls	Category/ Type 001	
Candidate Name		Event Turnout Calls
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	
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		Transaction ID : SB17-EX3868
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) General 2014	
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		Transaction ID : SB17-EX3931
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:		

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 111 OF 146			
	<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	Purpose of Disbursement Net Salary	001 Category/ Type
Candidate Name	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Transaction ID : SB17-EX3873
Net Salary		

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	Purpose of Disbursement Net Salary	001 Category/ Type
Candidate Name	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Transaction ID : SB17-EX3936
Net Salary		

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	Purpose of Disbursement Net Salary	001 Category/ Type
Candidate Name	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Transaction ID : SB17-EX3872
Net Salary		

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 112 OF 146	
	<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 Transaction ID : SB17-EX3935
City Augusta	State GA	
Zip Code 30907	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) 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 Transaction ID : SB17-EX3877
City Louisville	State CO	
Zip Code 80027	Purpose of Disbursement Campaign Survey	Campaign Survey
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) General 2014	
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	
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 113 OF 146	
	<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
City Augusta	State GA	
Purpose of Disbursement Repay Loan		Loan Payment
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) General 2014	
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
City Augusta	State GA	
Purpose of Disbursement Repay Loan		Conversion of Loan to Contribution
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) General 2014	
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
City Augusta	State GA	
Purpose of Disbursement Repay Loan		Conversion of Loan to Contribution
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) General 2014	
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 114 OF 146	
	<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 Repay Loan	
Candidate Name Richard Allen	Category/Type	Conversion of Loan to Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	

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 Repay Loan	
Candidate Name Richard Allen	Category/Type	Conversion of Loan to Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	

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 Repay Loan	
Candidate Name Richard Allen	Category/Type	Conversion of Loan to Contribution
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	

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 115 OF 146	
	<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 Zip Code 55347	
Purpose of Disbursement Contribution Refund to MCPC		Transaction ID : SB20c-CR3
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) General 2014	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		
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		
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**

NAME OF COMMITTEE (In Full) **Rick W. Allen for Congress** Transaction ID : **SC10-LN1**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
Richard Allen Primary
 Mailing Address 2237 Pickens Rd General
 Other (specify) ▼

City State ZIP Code
 Augusta GA 30904

Original Amount of Loan 50000	Cumulative Payment To Date .00	Balance Outstanding at Close of This Period 50000.00
----------------------------------	-----------------------------------	---

TERMS Date Incurred Date Due Interest Rate Secured:
 M^M / D^D / Y^Y Y^Y Y^Y M^M / D^D / Y^Y Y^Y Y^Y 0.00 % (apr) Yes No
 10 / 11 / 2011 01 / 08 / 2012

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-LN2

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
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)

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)..... 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)

Transaction ID : SC10-LN5

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
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)

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)..... 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) **Rick W. Allen for Congress** Transaction ID : **SC10-LN7**

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

NAME OF COMMITTEE (In Full) **Rick W. Allen for Congress** Transaction ID : **SC10-LN13**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014
Richard Allen Primary
 Mailing Address 2237 Pickens Rd General
 Other (specify) ▼

City State ZIP Code
 Augusta GA 30904

Original Amount of Loan 80000	Cumulative Payment To Date 30000.00	Balance Outstanding at Close of This Period 50000.00
----------------------------------	--	---

TERMS Date Incurred Date Due Interest Rate Secured:
 M 03 / D 31 / 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)..... ▶ 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 M /

D 24 D /

Y 2014 Y

M 01 M /

D 01 D /

Y 2015 Y

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

NAME OF COMMITTEE (In Full) **Rick W. Allen for Congress** Transaction ID : **SC10-LN1014**

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
75000	75000.00	.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 22 / 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).....	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

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: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="90000.00"/>
TOTALS This Period (last page in this line only).....	<input style="width: 100%;" type="text"/>

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

-1221.16

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

.00 .00 .00

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)	0.00
2) TOTALS This Period (last page this line number only)	0.00
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 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	Transaction ID : SD10-INV3757	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="7487.40"/>	<input type="text" value=".00"/>	<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	Transaction ID : SD10-INV3765	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2901.92"/>	<input type="text" value=".00"/>	<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	Transaction ID : SD10-INV3767	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="727.12"/>	<input type="text" value=".00"/>	<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

(Use separate schedule(s) for each numbered line)	PAGE 131 OF 146
	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 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-INV3768	
Amount Incurred This Period <input type="text" value="1573.64"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <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 <input type="text" value=".00"/>	Transaction ID : SD10-INV3792	
Amount Incurred This Period <input type="text" value="15000.00"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <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 <input type="text" value=".00"/>	Transaction ID : SD10-INV3836	
Amount Incurred This Period <input type="text" value="234.60"/>	Payment This Period <input type="text" value=".00"/>	Outstanding Balance at Close of This Period <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 132 OF 146
	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=".00"/>	Transaction ID : SD10-INV3837	
Amount Incurred This Period <input type="text" value="2.97"/>	Payment This Period <input type="text" value=".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=".00"/>	Transaction ID : SD10-INV3838	
Amount Incurred This Period <input type="text" value="12.46"/>	Payment This Period <input type="text" value=".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=".00"/>	Transaction ID : SD10-INV3839	
Amount Incurred This Period <input type="text" value="166.48"/>	Payment This Period <input type="text" value=".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

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		
City	State	Zip Code
Augusta	GA	30909

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3840	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="225.78"/>	<input type="text" value=".00"/>	<input 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		
City	State	Zip Code
North Augusta	SC	29841

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3842	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="14.28"/>	<input type="text" value=".00"/>	<input 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		
City	State	Zip Code
Augusta	GA	30909

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3841	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="248.40"/>	<input type="text" value=".00"/>	<input type="text" value="248.40"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="488.46"/>
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 USPS		Nature of Debt (Purpose): Invoice: Postage
Mailing Address 525 8th St		
City	State	Zip Code
Augusta	GA	30901

Outstanding Balance Beginning This Period	Transaction ID : SD10-INV3843	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="234.00"/>	<input type="text" value=".00"/>	<input type="text" value="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	Transaction ID : SD10-INV3844	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="88.11"/>	<input type="text" value=".00"/>	<input type="text" value="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	Transaction ID : SD10-INV3845	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="133.34"/>	<input type="text" value=".00"/>	<input type="text" value="133.34"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="455.45"/>
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

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-INV3766

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

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

Transaction ID : SD10-INV3846

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

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

Transaction ID : SD10-INV3847

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

(Use separate schedule(s) for each numbered line)	PAGE 136 OF 146
	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 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

(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
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
.00

Transaction ID : SD10-INV3769

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
3888.00 .00 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
.00

Transaction ID : SD10-INV3806

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
2943.08 .00 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
.00

Transaction ID : SD10-INV3849

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
499.00 .00 499.00

- 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) ▶

7330.08

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 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

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

(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
Staples

Mailing Address 246 Robert C. Daniels Jr. Pkwy

City State Zip Code
Augusta GA 30909

Nature of Debt (Purpose):
Invoice: Office Supplies

Outstanding Balance Beginning This Period **Transaction ID : SD10-INV3853**

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
Shane's Rib Shack

Mailing Address 4446 Washington Road Suite 1

City State Zip Code
Evans GA 30809

Nature of Debt (Purpose):
Invoice: Event Catering

Outstanding Balance Beginning This Period **Transaction ID : SD10-INV3854**

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
Party City

Mailing Address 249 Robert C Daniel Jr Pkwy

City State Zip Code
Augusta GA 30909

Nature of Debt (Purpose):
Invoice: Event Costs

Outstanding Balance Beginning This Period **Transaction ID : SD10-INV3855**

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="1051.17"/>
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 141 OF 146
	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 [.00]	Transaction ID : SD10-INV3807	
Amount Incurred This Period [3922.21]	Payment This Period [.00]	Outstanding Balance at Close of This Period [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 [.00]	Transaction ID : SD10-INV3856	
Amount Incurred This Period [3000.00]	Payment This Period [.00]	Outstanding Balance at Close of This Period [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 [.00]	Transaction ID : SD10-INV3857	
Amount Incurred This Period [50.00]	Payment This Period [.00]	Outstanding Balance at Close of This Period [50.00]

1) SUBTOTALS This Period This Page (optional)	[6972.21]
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)

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 <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : SD10-INV3858
Amount Incurred This Period <input style="width:100%;" type="text" value="15.00"/>	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="15.00"/>	

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 <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : SD10-INV3859
Amount Incurred This Period <input style="width:100%;" type="text" value="39.00"/>	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="39.00"/>	

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 <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : SD10-INV3759
Amount Incurred This Period <input style="width:100%;" type="text" value="319.23"/>	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="319.23"/>	

1) SUBTOTALS This Period This Page (optional) ▶	<input style="width:100%;" type="text" value="373.23"/>
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

(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
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**

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
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**

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
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**

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="20322.50"/>
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 Right Path Strategic Affairs		Nature of Debt (Purpose): Invoice: Win Bonus
Mailing Address 3960 Rolling Hills Drive		
City	State	Zip Code
Cumming	GA	30041

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		Nature of Debt (Purpose): Invoice: Campaign consulting
Mailing Address 3960 Rolling Hills Drive		
City	State	Zip Code
Cumming	GA	30041

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		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	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

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	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="4000.00"/>	<input type="text" value=".00"/>	<input type="text" value="4000.00"/>

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	
<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"/>

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	
<input type="text" value=".00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="4000.00"/>	<input type="text" value=".00"/>	<input type="text" value="4000.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="33000.00"/>
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
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) ▶
- 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) ▶

[] 16169.43

[] 191524.56

[] 1000000.00

[] 1191524.56