

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Buddy PAC

ADDRESS (number and street) **824 S. Milledge Ave**
Ste 101
 Check if different than previously reported. (ACC) **Athens** **GA** **30605**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C **C00597062** 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on **11** / **06** / **2018** in the State of **GA**

5. Covering Period **10** / **18** / **2018** through **11** / **26** / **2018**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer **Kilgore, Paul, , ,**

Signature of Treasurer **Kilgore, Paul, , ,** [Electronically Filed] Date **12** / **06** / **2018**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Buddy PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		48080.43
(b) Cash on Hand at Beginning of Reporting Period.....	44816.49	
(c) Total Receipts (from Line 19)	17200.00	112200.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	62016.49	160280.43
7. Total Disbursements (from Line 31).....	14484.80	112748.74
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	47531.69	47531.69
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Buddy PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3700.00	15700.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3700.00	15700.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	13500.00	91000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	17200.00	106700.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	17200.00	112200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	17200.00	112200.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	8584.80	12848.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8584.80	12848.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	96000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	3900.00	3900.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14484.80	112748.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14484.80	112748.74

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	17200.00	106700.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17200.00	106700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8584.80	12848.74
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8584.80	12848.74

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)
Buddy PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Giorgianni, Chris, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2018 Transaction ID : SA11AI.4729		
Mailing Address 230 Wiley Bottom Rd			Amount of Each Receipt this Period 2700.00		
City Savannah	State GA	Zip Code 31411	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 2700.00		
Name of Employer (for Individual) JCB, Inc.		Occupation (for Individual) Construction Equipment Manufacturer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Madson, Thomas, R., ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2018 Transaction ID : SA11AI.4710		
Mailing Address 1021 N Garfield St Apt B42			Amount of Each Receipt this Period 500.00		
City Arlington	State VA	Zip Code 22201	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 500.00		
Name of Employer (for Individual) Information Requested		Occupation (for Individual) Information Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Oberlander, Kevin, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2018 Transaction ID : SA11AI.4726		
Mailing Address 705 E Main Ave			Amount of Each Receipt this Period 500.00		
City Bismarck	State ND	Zip Code 58501	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 500.00		
Name of Employer (for Individual) Dakota Pharmacy		Occupation (for Individual) Pharmacist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional).....	3700.00
TOTAL This Period (last page this line number only).....	3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Buddy PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ALSTON & BIRD PAC

Mailing Address **THE ATLANTIC BUILDING**
950 F STREET, NW

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00395723**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
10 / 29 / 2018

Transaction ID : SA11C.4712

Amount of Each Receipt this Period
2500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ANTHEM, INC. POLITICAL ACTION COMMITTEE (ANTHEM PAC)

Mailing Address **1001 PENNSYLVANIA AVENUE, NW**
SUITE 710

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00197228**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
11 / 06 / 2018

Transaction ID : SA11C.4735

Amount of Each Receipt this Period
1000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS--PAC OF AAO

Mailing Address **317 MASSACHUSETTS AVE., N.E.**
1ST FLOOR

City **WASHINGTON** State **DC** Zip Code **20002**

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
10 / 24 / 2018

Transaction ID : SA11C.4714

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **6000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Buddy PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SENIOR CARE PHARMACY COALITION PAC			Date of Receipt
Mailing Address 1700 PENNSYLVANIA AVENUE NW SUITE 200			<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2018"/>
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : SA11C.4708
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00615203"/>			Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. UNITED TECHNOLOGIES CORPORATION POLITICAL ACTION COMMITTEE			Date of Receipt
Mailing Address 1101 PENNSYLVANIA AVE, NW 10TH FLOOR			<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2018"/>
City WASHINGTON	State DC	Zip Code 20004	Transaction ID : SA11C.4716
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00035683"/>			Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.			Date of Receipt
Mailing Address			<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code	
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text"/>			Amount of Each Receipt this Period <input type="text"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="7500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="13500.00"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Buddy PAC

Full Name (Last, First, Middle Initial)

A. HenryAlan, LLC

Mailing Address 5822 Crighton Dr

City
Dublin

State
OH

Zip Code
43016

Purpose of Disbursement
PAC Transaction Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4733

Amount of Each Disbursement this Period

124.80

Memo Item

Full Name (Last, First, Middle Initial)

B. HenryAlan, LLC

Mailing Address 5822 Crighton Dr

City
Dublin

State
OH

Zip Code
43016

Purpose of Disbursement
PAC Transaction Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4737

Amount of Each Disbursement this Period

390.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Sea Island Company

Mailing Address 100 Cloister Dr

City
Sea Island

State
GA

Zip Code
31561

Purpose of Disbursement
PAC Event Facility Rental

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4721

Amount of Each Disbursement this Period

8000.00

Memo Item

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

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

8514.80

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Buddy PAC

A. Suntrust

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 4418

City Atlanta State GA Zip Code 30302

Purpose of Disbursement PAC Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4719

Amount of Each Disbursement this Period: 35.00

Memo Item

B. Suntrust

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 4418

City Atlanta State GA Zip Code 30302

Purpose of Disbursement PAC Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4734

Amount of Each Disbursement this Period: 35.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 70.00

TOTAL This Period (last page this line number only)..... ▶ 8584.80

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Buddy PAC

A. DONOVAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 60530

City: STATEN ISLAND State: NY Zip Code: 10306

Purpose of Disbursement: Contribution

Candidate Name: **DONOVAN, DAN, , ,**

Office Sought: House Senate President
State: NY District: 11

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 05 / 2018

FEC Identification Number: **C 000571869**
Transaction ID : **SB23.4723**
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 435

City: SEWICKLEY State: PA Zip Code: 15143

Purpose of Disbursement: Contribution

Candidate Name: **ROTHFUS, KEITH MR., , ,**

Office Sought: House Senate President
State: PA District: 12

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 26 / 2018

FEC Identification Number: **C 000497115**
Transaction ID : **SB23.4720**
Amount of Each Disbursement this Period: 1000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: **C**

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	2000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Buddy PAC

A. Brad Raffensberger Campaign

Full Name (Last, First, Middle Initial)

Mailing Address 10945 State Bridge Road
Ste 401-282

City Johns Creek State GA Zip Code 30222

Purpose of Disbursement Contribution (State/Local Committee) 011 Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼ Runoff

State: District:

Date of Disbursement 11 / 19 / 2018

FEC Identification Number C

Transaction ID : SB29.4738

Amount of Each Disbursement this Period 3900.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3900.00
TOTAL This Period (last page this line number only).....▶	3900.00