

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Rick W. Allen for Congress

ADDRESS (number and street) P. O. Box 338

Check if different than previously reported. (ACC) Augusta GA 30903

2. **FEC IDENTIFICATION NUMBER** C00504019

3. IS THIS REPORT **NEW (N)** OR **AMENDED (A)**

CITY GA STATE 12 ZIP CODE STATE DISTRICT

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)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on M M / D D / Y Y Y Y in the State of

(c) 30-Day **POST**-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 11 / 25 / 2014 through M M / D D / Y Y Y Y 12 / 31 / 2014

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 E. G. Meybohm

Signature of Treasurer E. G. Meybohm *[Electronically Filed]* Date M M / D D / Y Y Y Y 01 / 30 / 2015

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

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))....	60040	530468.77
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	60040	530468.77
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	153220.11	177346.59
(b) Total Offsets to Operating Expenditures (from Line 14).....	1221.16	1221.16
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	151998.95	176125.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	60109.57	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	1208746.16	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

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-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20250	28820
(ii) Unitemized.....	1790	3715
(iii) TOTAL of contributions from individuals ▶	22040	32535
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....	38000	57500
(d) The Candidate.....		440433.77
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	60040	530468.77
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	125000	125000
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	125000	125000
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	1221.16	1221.16
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	186261.16	656689.93

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	153220.11	177346.59
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		505000
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		505000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	153220.11	682346.59

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	27068.52
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	186261.16
25. SUBTOTAL (add Line 23 and Line 24).....	213329.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	153220.11
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	60109.57

**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 5 OF 86
	<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)
Mr. William G Boatman

Mailing Address 3519 Wheeler Rd

City Augusta State GA Zip Code 30909-6516

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

Name of Employer Meybohm Realtors LLC Occupation Real Estate

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
 12 / 09 / 2014

Transaction ID : SA11Ai-CN4567

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Janet Burch

Mailing Address P.O. Box 27

City Trenton State SC Zip Code 29847

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 Y Y
 12 / 19 / 2014

Transaction ID : SA11Ai-CN4615

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Dr. Frank L. Carter

Mailing Address 53 Conifer Circle

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 **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2014

Transaction ID : SA11Ai-CN4612

Amount of Each Receipt this Period
500

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 6 OF 86
	<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. Jacqueline S Cates

Mailing Address 805 Walton Woods Ct

City Augusta State GA Zip Code 30909

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

Name of Employer Retired Occupation Retired

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 / 29 / 2014

Transaction ID : SA11Ai-CN4554

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Dr. Johnny F. Christian

Mailing Address P O Box 449

City Waynesboro State GA Zip Code 30830

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

Name of Employer Self Occupation Physician

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
 12 / 19 / 2014

Transaction ID : SA11Ai-CN4614

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr. Zane Christopher

Mailing Address 319 Osprey Point

City North Augusta State SC Zip Code 29841

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

Name of Employer TaxSlayer Occupation Owner

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
 12 / 19 / 2014

Transaction ID : SA11Ai-CN4606

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 7 OF 86
	<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. Julian F. Davis Jr

Mailing Address 3439 Deans Bridge Rd

City Augusta State GA Zip Code 30906

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

Name of Employer None Occupation Retired

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
 12 / 15 / 2014

Transaction ID : SA11Ai-CN4598

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Ms. Phyllis L. Durrence

Mailing Address 2296 Old Highway 250

City Claxton State GA Zip Code 30417

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

Name of Employer None Occupation Homemaker

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
 12 / 30 / 2014

Transaction ID : SA11Ai-CN4623

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Dr. Shelley A Griffin

Mailing Address 4 Huntington Pl

City Waynesboro State GA Zip Code 30830

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

Name of Employer Medical Specialist Inc. Occupation MD

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
 12 / 19 / 2014

Transaction ID : SA11Ai-CN4613

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 8 OF 86
	<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. 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: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date: **300**

Date of Receipt: **12 / 09 / 2014**

Transaction ID : SA11Ai-CN4566

Amount of Each Receipt this Period: **300**

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: 2015
 Primary General
 Other (specify) General 2014 Debt

Election Cycle-to-Date: **500**

Date of Receipt: **12 / 11 / 2014**

Transaction ID : SA11Ai-CN4584

Amount of Each Receipt this Period: **500**

C. Full Name (Last, First, Middle Initial)
Dr. Joseph L. Jackson Jr

Mailing Address 3293 Hwy. 56 South

City: Waynesboro State: GA Zip Code: 30830

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

Name of Employer: Medical Specialists Occupation: Physician

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

Election Cycle-to-Date: **350**

Date of Receipt: **12 / 19 / 2014**

Transaction ID : SA11Ai-CN4604

Amount of Each Receipt this Period: **350**

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

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

1150.00

**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 86
	<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. Joseph L. Jackson

Mailing Address 6 Huntington Place

City State Zip Code
Waynesboro GA 30830

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

Name of Employer Occupation
Medical Specialists Physician

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
12 / 19 / 2014

Transaction ID : SA11Ai-CN4607

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. Russell Krueger

Mailing Address 3680 Bay Point

City State Zip Code
Augusta GA 30907

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

Name of Employer Occupation
Ocozzio Principle

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2014

Transaction ID : SA11Ai-CN4628

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr. Chalton Jerome Lane Jr

Mailing Address 509 Crestview Drive

City State Zip Code
Statesboro GA 30458

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

Name of Employer Occupation
Claxton Poultry Farms President

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

Election Cycle-to-Date
600

Date of Receipt
M M / D D / Y Y Y Y
12 / 30 / 2014

Transaction ID : SA11Ai-CN4624

Amount of Each Receipt this Period
600

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 10 OF 86
	<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. Chalton Jerome Lane Jr

Mailing Address 509 Crestview Drive

City Statesboro State GA Zip Code 30458

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

Name of Employer Claxton Poultry Farms Occupation President

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

Election Cycle-to-Date **2200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2014

Transaction ID : SA11Ai-CN4627

Amount of Each Receipt this Period
 1600

B. Full Name (Last, First, Middle Initial)
Francis Lott

Mailing Address 1201 N. Peterson Avenue

City Douglas State GA Zip Code 31533

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

Name of Employer Lott Properties Inc. Occupation President

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

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2014

Transaction ID : SA11Ai-CN4620

Amount of Each Receipt this Period
 750

C. Full Name (Last, First, Middle Initial)
William Moretz

Mailing Address 2641 Henry St

City Augusta State GA Zip Code 30904

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

Name of Employer Self Occupation Physician

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
 12 / 11 / 2014

Transaction ID : SA11Ai-CN4582

Amount of Each Receipt this Period
 250

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

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

2600.00

**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 86
	<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)
Mrs. Minta M Nixon

Mailing Address 621 Scotts Way

City Augusta State GA Zip Code 30909

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

Name of Employer None Occupation Retired

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
 12 / 11 / 2014

Transaction ID : SA11Ai-CN4576

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. H M Osteen Jr

Mailing Address 604 Milledge Rd

City Augusta State GA Zip Code 30904-4388

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

Name of Employer None Occupation Retired

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

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2014

Transaction ID : SA11Ai-CN4579

Amount of Each Receipt this Period
600

C. Full Name (Last, First, Middle Initial)
Larry S. Prather Sr

Mailing Address PO Box 70

City Harlem State GA Zip Code 30814-0070

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

Name of Employer Prather Construction Co. Occupation Owner

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

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2014

Transaction ID : SA11Ai-CN4625

Amount of Each Receipt this Period
750

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 12 OF 86
	<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)
Allen C. Rice

Mailing Address P.O. Box 447

City State Zip Code
Vidalia GA 30475

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

Name of Employer Occupation
Savannah Luggage Works President

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
12 / 12 / 2014

Transaction ID : SA11Ai-CN4595

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Dr. John E. Riffle

Mailing Address 594 Firestone Pl

City State Zip Code
Martinez GA 30907-8955

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

Name of Employer Occupation
VA Medical Center Augusta Physician

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
12 / 12 / 2014

Transaction ID : SA11Ai-CN4589

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. Ed Roche

Mailing Address 105 Woodridge Road

City State Zip Code
Dublin GA 31021

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

Name of Employer Occupation
Self Business

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
12 / 11 / 2014

Transaction ID : SA11Ai-CN4578

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 13 OF 86
	<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. Paul Roesel

Mailing Address 2570 Jones Mill Rd

City Statesboro State GA Zip Code 30461

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

Name of Employer H.A. Sack Co. Inc. Occupation Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 02 / 2014

Transaction ID : SA11Ai-CN4557

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Dr. Harvey J Sanders Jr

Mailing Address 2 Huntington Pl

City Waynesboro State GA Zip Code 30830

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

Name of Employer Self Occupation Physician

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
 12 / 19 / 2014

Transaction ID : SA11Ai-CN4611

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Robinson W Schilling

Mailing Address 3402 Sasanqua Dr

City Augusta State GA Zip Code 30909

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

Name of Employer None Occupation Retired Physician

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
 12 / 11 / 2014

Transaction ID : SA11Ai-CN4583

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 14 OF 86
	<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)
R. Brooks Scurry

Mailing Address 2256 Cumming Road

City Augusta State GA Zip Code 30904

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

Name of Employer None Occupation Retired

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
 12 / 12 / 2014

Transaction ID : SA11Ai-CN4591

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. M Bert Storey

Mailing Address 502 Scotts Way

City Augusta State GA Zip Code 30909

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

Name of Employer Bert Storey Associates Occupation Commerical Real Estate

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
 12 / 12 / 2014

Transaction ID : SA11Ai-CN4592

Amount of Each Receipt this Period
1000

C. 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: 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
 12 / 19 / 2014

Transaction ID : SA11Ai-CN4605

Amount of Each Receipt this Period
500

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 15 OF 86
	<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)
Mrs. J.P. Stubbs

Mailing Address **PO Box 956**

City **Statesboro** State **GA** Zip Code **30459**

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

Name of Employer **Stubbs Oil** Occupation **Owner**

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
12 / 30 / 2014

Transaction ID : SA11Ai-CN4626

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Cathy J. Turpin

Mailing Address **2350 Ellis Rd**

City **Kennesaw** State **GA** Zip Code **30152**

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

Name of Employer **Conlan Co.** 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
12 / 11 / 2014

Transaction ID : SA11Ai-CN4580

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Mr. B Gene Waldron

Mailing Address **P.O. Box 530**

City **Douglas** State **GA** Zip Code **31534**

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

Name of Employer **Waldron Enterprises Inc** Occupation **Owner**

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
12 / 12 / 2014

Transaction ID : SA11Ai-CN4594

Amount of Each Receipt this Period
1000

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

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

3000.00

**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 86
	<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)
F. Blake 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 Brown Radiology Occupation Physician

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
 12 / 12 / 2014

Transaction ID : SA11Ai-CN4590

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Ms. Lucy H. Weigle

Mailing Address 8 Bent Tree Ct

City Augusta State GA Zip Code 30909

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

Name of Employer Self Occupation Artist

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
 12 / 11 / 2014

Transaction ID : SA11Ai-CN4577

Amount of Each Receipt this Period
500

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).....

1000.00

20250.00

**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 86
	<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. Action Committee For Rural Electrification
 Full Name (Last, First, Middle Initial)
 Mailing Address 4301 Wilson Boulevard
 City State Zip Code
 Arlington VA 22203
 FEC ID number of contributing federal political committee. **C** C00002972
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : SA11C-CN4617
 Amount of Each Receipt this Period
 5000

B. AFLAC Incorporated PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1932 Wynnton Road
 City State Zip Code
 Columbus GA 31999
 FEC ID number of contributing federal political committee. **C** C00034157
 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 Y Y
 12 / 09 / 2014
Transaction ID : SA11C-CN4572
 Amount of Each Receipt this Period
 5000

C. American Bankers Association PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1120 Connecticut Avenue NW
 City State Zip Code
 Washington DC 20036
 FEC ID number of contributing federal political committee. **C** C00004275
 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 Y Y
 12 / 19 / 2014
Transaction ID : SA11C-CN4616
 Amount of Each Receipt this Period
 5000

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

15000.00

**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 86
	<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)
AT&T Inc. Federal PAC

Mailing Address 208 S. Akard Street Ste. 2701

City Dallas State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

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
 12 / 15 / 2014

Transaction ID : SA11C-CN4600

Amount of Each Receipt this Period
 2000

B. Full Name (Last, First, Middle Initial)
Comcast Corporation & NBCUniversal PAC

Mailing Address One Comcast Center
1701 JFK Boulevard

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

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 Y Y
 12 / 09 / 2014

Transaction ID : SA11C-CN4571

Amount of Each Receipt this Period
 2500

C. Full Name (Last, First, Middle Initial)
CULAC the PAC Of Credit Union National Association

Mailing Address 601 Pennsylvania Avenue NW
South Building Suite 600

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00007880

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 Y Y
 12 / 22 / 2014

Transaction ID : SA11C-CN4618

Amount of Each Receipt this Period
 2500

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 19 OF 86
	<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)
CULAC the PAC Of Credit Union National Association

Mailing Address 601 Pennsylvania Avenue NW
South Building Suite 600

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00007880**

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 Y
 12 / 22 / 2014

Transaction ID : SA11C-CN4619

Amount of Each Receipt this Period
 2500

B. Full Name (Last, First, Middle Initial)
International Paper Political Action Committee

Mailing Address 1101 Pennsylvania Avenue NW
Suite 200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00034405**

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 Y
 12 / 15 / 2014

Transaction ID : SA11C-CN4602

Amount of Each Receipt this Period
 2500

C. Full Name (Last, First, Middle Initial)
PricewaterhouseCoopers PAC

Mailing Address 600 13th Street NW Suite 1000

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00107235**

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 Y
 12 / 09 / 2014

Transaction ID : SA11C-CN4570

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 20 OF 86
	<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)
Primerica Political Action Committee

Mailing Address 1 Primerica Parkway

City State Zip Code
Duluth GA 30099

FEC ID number of contributing federal political committee. **C** C00521914

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 09 / 2014

Transaction ID : SA11C-CN4568

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Resolute Forest Products PAC

Mailing Address 3502 Regents Park Court

City State Zip Code
Arlington TX 76017

FEC ID number of contributing federal political committee. **C** C00350884

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 Y
12 / 15 / 2014

Transaction ID : SA11C-CN4599

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Solvay America Inc. Employee Political Fund

Mailing Address 3333 Richmond Avenue

City State Zip Code
Houston TX 77098

FEC ID number of contributing federal political committee. **C** C00520254

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 09 / 2014

Transaction ID : SA11C-CN4569

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 21 OF 86
	<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)
The Home Depot Inc. Political Action Committee

Mailing Address 1155 F Street NW Suite 400

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00284885

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
 12 / 12 / 2014

Transaction ID : SA11C-CN4593

Amount of Each Receipt this Period
 5000

B. Full Name (Last, First, Middle Initial)
United Technologies Corp. Employee Political Action Committee

Mailing Address 1101 Pennsylvania Avenue NW
10th Floor

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00035683

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
 12 / 15 / 2014

Transaction ID : SA11C-CN4601

Amount of Each Receipt this Period
 2500

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).....

7500.00

38000.00

**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 86
	<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)
Mr. 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 Y Y
11 / 25 / 2014

Transaction ID : SA13a-LN1020

Amount of Each Receipt this Period
125000

Personal Funds

B. 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

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).....

125000.00

125000.00

**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 86
	<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

A. Full Name (Last, First, Middle Initial)
SCM Associates Inc.

Mailing Address **PO Box 254**

City **Dublin** State **NH** Zip Code **03444**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **1221.16** _____

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 02 / 2014

Transaction ID : SA14-ER9

Amount of Each Receipt this Period
 _____ **1221.16** _____

Expenditure Refund

B. 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
 _____ _____ _____

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).....

_____ **1221.16** _____

_____ **1221.16** _____

**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 24 OF 86			
	<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. Lauren Swing		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2014
Mailing Address 807 Saint Andrews Drive		Amount of Each Disbursement this Period 8302.32
City Augusta	State GA	Zip Code 30909
Purpose of Disbursement Net Win Bonus	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX4086
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 Win Bonus
State: District:		

Full Name (Last, First, Middle Initial) B. Lauren Swing		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 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-EX3971
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) c. Lauren Swing		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 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-EX4032
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Net Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11885.14
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 25 OF 86	
	<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. Lauren Swing		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2014
Mailing Address 807 Saint Andrews Drive		Amount of Each Disbursement this Period 504.75
City Augusta	State GA	Zip Code 30909
Purpose of Disbursement Reimbursement: See Below	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX4043
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Reimbursement: See Below	

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2014
Mailing Address PO Box 433		Amount of Each Disbursement this Period 342.20
City Phoenix	State AZ	Zip Code 85001
Purpose of Disbursement Airfare	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX4044
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Airfare	

Full Name (Last, First, Middle Initial) c. Lauren Swing		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 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-EX4078
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Net Salary	

SUBTOTAL of Disbursements This Page (optional).....	2296.16
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 26 OF 86			
	<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 / 26 / 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	Transaction ID : SB17-EX3969
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) B. Diane Morgan		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 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	Transaction ID : SB17-EX4030
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) C. Diane Morgan		Date of Disbursement M M / D D / Y Y Y Y 12 / 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	Transaction ID : SB17-EX4075
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Net Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1699.10
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 27 OF 86			
	<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. Capitol Strategy Group			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 2700 Cumberland Pkwy Ste 150			Amount of Each Disbursement this Period 5031.89
City Atlanta	State GA	Zip Code 30339	Transaction ID : SB17-EX4037
Purpose of Disbursement Fundraising Consulting		Category/ Type 001	
Candidate Name			Fundraising Consulting
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. Capitol Strategy Group			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2014
Mailing Address 2700 Cumberland Pkwy Ste 150			Amount of Each Disbursement this Period 5270.15
City Atlanta	State GA	Zip Code 30339	Transaction ID : SB17-EX4022
Purpose of Disbursement Fundraising Consulting		Category/ Type 001	
Candidate Name			Fundraising Consulting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 5.75
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX3965
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	10307.79
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 28 OF 86			
	<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 / 28 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX3966
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	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 12 / 01 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 8.63
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX3967
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	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 12 / 02 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 29.90
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX4019
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	52.91
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 29 OF 86			
	<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 12 / 03 / 2014	
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 57.50	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX4020	
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2014	
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 17.83	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX4029	
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Piryx Inc.			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014	
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 11.50	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17-EX4041	
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	86.83
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 30 OF 86	
	<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 12 / 26 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 80.51
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit Card Service Fee	Category/Type 001	Transaction ID : SB17-EX4053
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address IRS Payment Center		Amount of Each Disbursement this Period 4080.09
City Ogden	State UT Zip Code 84201	
Purpose of Disbursement Tax Payment	Category/Type 001	Transaction ID : SB17-EX4040
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Tax Payment
State: District:		

Full Name (Last, First, Middle Initial) C. Comcast		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 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	Category/Type 001	Transaction ID : SB17-EX3988
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Telephone & Internet Service
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4434.14
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 31 OF 86			
	<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

Mailing Address PO Box 1005184

City Atlanta State GA Zip Code 30348

Purpose of Disbursement Telephone & Internet Service

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 24 / 2014

Amount of Each Disbursement this Period: 273.54

Transaction ID : SB17-EX4042

Telephone & Internet Service

Category/Type: 001

Full Name (Last, First, Middle Initial)
B. Cline X Design

Mailing Address 1977 Dibble Rd

City Aiken State SC Zip Code 29801

Purpose of Disbursement Photography

Candidate Name

Office Sought: House Senate President

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

State: District:

Date of Disbursement: 11 / 26 / 2014

Amount of Each Disbursement this Period: 400.00

Transaction ID : SB17-EX3952

Photography

Category/Type: 001

Full Name (Last, First, Middle Initial)
c. Public Opinion Strategies

Mailing Address 214 N Fayette St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Poll

Candidate Name

Office Sought: House Senate President

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

State: District:

Date of Disbursement: 11 / 26 / 2014

Amount of Each Disbursement this Period: 15000.00

Transaction ID : SB17-EX3959

Poll

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 15673.54

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 32 OF 86	
	<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. Gober Hilgers PLLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 2101 Cedar Springs Rd #1050		Amount of Each Disbursement this Period 322.50
City Dallas State TX Zip Code 75201	Purpose of Disbursement Legal Fees	
Candidate Name	Category/Type 001	Transaction ID : SB17-EX3957
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	Legal Fees	
State: District:		

Full Name (Last, First, Middle Initial) B. Gober Hilgers PLLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2014
Mailing Address 2101 Cedar Springs Rd #1050		Amount of Each Disbursement this Period 120.00
City Dallas State TX Zip Code 75201	Purpose of Disbursement Legal Fees	
Candidate Name	Category/Type 001	Transaction ID : SB17-EX4025
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Legal Fees	
State: District:		

Full Name (Last, First, Middle Initial) C. William Wheat		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2014
Mailing Address PO Box 944		Amount of Each Disbursement this Period 3021.52
City Langley State SC Zip Code 29834	Purpose of Disbursement Net Win Bonus	
Candidate Name	Category/Type 001	Transaction ID : SB17-EX4087
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 Win Bonus	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3464.02
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 33 OF 86	
	<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. William Wheat		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 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	Transaction ID : SB17-EX3972
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) B. William Wheat		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2014
Mailing Address PO Box 944		Amount of Each Disbursement this Period 736.22
City Langley	State SC	
Zip Code 29834	Purpose of Disbursement Reimbursement: See Below	Transaction ID : SB17-EX4015
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Reimbursement: See Below
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2014
Mailing Address 525 8th St		Amount of Each Disbursement this Period 686.00
City Augusta	State GA	
Zip Code 30901	Purpose of Disbursement Postage	Transaction ID : SB17-EX4016
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Postage
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1884.55
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 34 OF 86			
	<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. Hilton Garden Inn		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2014
Mailing Address 1065 Stevens Creek Road		Amount of Each Disbursement this Period 26.35
City Augusta	State GA	
Zip Code 30907	Purpose of Disbursement Event Expense	Transaction ID : SB17-EX4018
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Event Expense
State: District:		

Full Name (Last, First, Middle Initial) B. William Wheat		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 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	Transaction ID : SB17-EX4033
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Net Salary
State: District:		

Full Name (Last, First, Middle Initial) c. William Wheat		Date of Disbursement M M / D D / Y Y Y Y 12 / 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	Transaction ID : SB17-EX4080
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	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 35 OF 86			
	<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 12 / 02 / 2014
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 2000.00
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Website - November	Transaction ID : SB17-EX3985
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	Website - November
State: District:		

Full Name (Last, First, Middle Initial) B. Push Digital		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 739.43
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Email Marketing	Transaction ID : SB17-EX3986
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	Email Marketing
State: District:		

Full Name (Last, First, Middle Initial) c. Push Digital		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 829.00
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Online Donations	Transaction ID : SB17-EX3987
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Online Donations
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3568.43
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 36 OF 86			
	<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. DigitalXpress Printing		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 2211 Beaver Ruin Road Ste 170		Amount of Each Disbursement this Period 2901.92
City Norcross State GA Zip Code 30071	Purpose of Disbursement Invitation Printing Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Transaction ID : SB17-EX3956 Invitation Printing

Full Name (Last, First, Middle Initial) B. DigitalXpress Printing		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 2211 Beaver Ruin Road Ste 170		Amount of Each Disbursement this Period 727.12
City Norcross State GA Zip Code 30071	Purpose of Disbursement Invitation Printing Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Transaction ID : SB17-EX3954 Invitation Printing

Full Name (Last, First, Middle Initial) c. DigitalXpress Printing		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 2211 Beaver Ruin Road Ste 170		Amount of Each Disbursement this Period 1573.64
City Norcross State GA Zip Code 30071	Purpose of Disbursement Invitation Printing Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Transaction ID : SB17-EX3953 Invitation Printing

SUBTOTAL of Disbursements This Page (optional).....	5202.68
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 37 OF 86			
	<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. DigitalXpress Printing		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 2211 Beaver Ruin Road Ste 170		Amount of Each Disbursement this Period 1804.28
City Norcross State GA Zip Code 30071	Purpose of Disbursement Invitation Printing	Transaction ID : SB17-EX3955
Candidate Name	Category/Type 001	Invitation Printing
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. DigitalXpress Printing		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 2211 Beaver Ruin Road Ste 170		Amount of Each Disbursement this Period 707.80
City Norcross State GA Zip Code 30071	Purpose of Disbursement Letterhead	Transaction ID : SB17-EX3984
Candidate Name	Category/Type 001	Letterhead
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. DigitalXpress Printing		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2014
Mailing Address 2211 Beaver Ruin Road Ste 170		Amount of Each Disbursement this Period 1555.94
City Norcross State GA Zip Code 30071	Purpose of Disbursement Direct Mail and Postage	Transaction ID : SB17-EX4021
Candidate Name	Category/Type 001	Direct Mail and Postage
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4068.02
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 38 OF 86	
	<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. DigitalXpress Printing		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2014
Mailing Address 2211 Beaver Ruin Road Ste 170		Amount of Each Disbursement this Period 2480.84
City Norcross State GA Zip Code 30071	Purpose of Disbursement Printing of Holiday Cards 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17-EX4039 Printing of Holiday Cards
State: District:		

Full Name (Last, First, Middle Initial) B. Right Path Strategic Affairs		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 3960 Rolling Hills Drive		Amount of Each Disbursement this Period 10000.00
City Cumming State GA Zip Code 30041	Purpose of Disbursement Campaign consulting 001 Category/Type	
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	Transaction ID : SB17-EX4035 Campaign consulting
State: District:		

Full Name (Last, First, Middle Initial) c. Tactical Communications Solutions		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2014
Mailing Address 428 Collier Road NW		Amount of Each Disbursement this Period 4000.00
City Atlanta State GA Zip Code 30309	Purpose of Disbursement Communications Consulting Fee 001 Category/Type	
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	Transaction ID : SB17-EX4024 Communications Consulting Fee
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	16480.84
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 39 OF 86			
	<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. Capitol Response

Mailing Address 2700 Cumberland Parkway Suite 15

City Atlanta State GA Zip Code 30339

Purpose of Disbursement
FEC Compliance Consulting

Candidate Name

Office Sought: House Senate President

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 15 / 2014

Amount of Each Disbursement this Period
1750.00

Transaction ID : SB17-EX4036

FEC Compliance Consulting

Category/Type
001

Full Name (Last, First, Middle Initial)
B. Capitol Response

Mailing Address 2700 Cumberland Parkway Suite 15

City Atlanta State GA Zip Code 30339

Purpose of Disbursement
FEC Compliance Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 08 / 2014

Amount of Each Disbursement this Period
1750.00

Transaction ID : SB17-EX4023

FEC Compliance Consulting

Category/Type
001

Full Name (Last, First, Middle Initial)
c. Card Services Center

Mailing Address PO Box 105025

City Atlanta State GA Zip Code 30348

Purpose of Disbursement
Credit Card Paid by Card Services Center

Candidate Name

Office Sought: House Senate President

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

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 02 / 2014

Amount of Each Disbursement this Period
10583.86

Transaction ID : SB17-EX4014

Credit Card Paid by Card Services Center

Category/Type
001

SUBTOTAL of Disbursements This Page (optional)..... 14083.86

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 40 OF 86	
	<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. Southern Beverage Outlet		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 248 Bobby Jones Expressway		Amount of Each Disbursement this Period 234.60
City Augusta	State GA	
Zip Code 30907	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3990
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	[MEMO ITEM] Event Costs
State: District:		

Full Name (Last, First, Middle Initial) B. Exxon Mobil		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 16096 S Highway 11		Amount of Each Disbursement this Period 2.97
City Fair Play	State SC	
Zip Code 29643	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3991
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	[MEMO ITEM] Fuel
State: District:		

Full Name (Last, First, Middle Initial) c. Fresh Market		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 2701 Washington Road		Amount of Each Disbursement this Period 12.46
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3992
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	[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 41 OF 86			
	<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 12 / 02 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 166.48
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3993
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	[MEMO ITEM] Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 225.78
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3994
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	[MEMO ITEM] Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 248.40
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3995
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	[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 42 OF 86			
	<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. Walmart		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 1201 Knox Ave		Amount of Each Disbursement this Period 14.28
City North Augusta	State SC	
Zip Code 29841	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3996
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	[MEMO ITEM] Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 525 8th St		Amount of Each Disbursement this Period 234.00
City Augusta	State GA	
Zip Code 30901	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3997
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	[MEMO ITEM] Postage
State: District:		

Full Name (Last, First, Middle Initial) c. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 3744 Wheeler Road		Amount of Each Disbursement this Period 88.11
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3998
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	[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 43 OF 86			
	<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. Holiday Inn		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 455 Commerce Drive		Amount of Each Disbursement this Period 133.34
City Statesboro State GA Zip Code 30461	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX3999
Candidate Name	Category/Type 001	[MEMO ITEM] Lodging
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. Jet Foods		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 3939 E. Main Street		Amount of Each Disbursement this Period 75.00
City Soperton State GA Zip Code 30457	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4000
Candidate Name	Category/Type 001	[MEMO ITEM] Fuel
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) c. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 3744 Wheeler Road		Amount of Each Disbursement this Period 66.50
City Augusta State GA Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4001
Candidate Name	Category/Type 001	[MEMO ITEM] Fuel
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:		

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 44 OF 86	
	<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 Cloister		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 100 Cloister Drive		Amount of Each Disbursement this Period 3841.06
City State Zip Code Sea Island GA 31561	Purpose of Disbursement Administrative/Salary/Overhead Expenses	
Candidate Name	Category/Type 001	Transaction ID : SB17-EX4002
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:		[MEMO ITEM] Lodging

Full Name (Last, First, Middle Initial) B. NationBuilder		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 448 S Hill Street #200		Amount of Each Disbursement this Period 499.00
City State Zip Code Los Angeles CA 90013	Purpose of Disbursement Administrative/Salary/Overhead Expenses	
Candidate Name	Category/Type 001	Transaction ID : SB17-EX4003
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:		[MEMO ITEM] Computer Software

Full Name (Last, First, Middle Initial) c. Party 'N' Dollar		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 592 Bobby Jones Expressway		Amount of Each Disbursement this Period 29.66
City State Zip Code Augusta GA 30907	Purpose of Disbursement Administrative/Salary/Overhead Expenses	
Candidate Name	Category/Type 001	Transaction ID : SB17-EX4004
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:		[MEMO ITEM] Event 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 45 OF 86			
	<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. Southern Beverage Outlet		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 248 Bobby Jones Expressway		Amount of Each Disbursement this Period 282.17
City Augusta	State GA	
Zip Code 30907	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4005
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	[MEMO ITEM] Event Costs
State: District:		

Full Name (Last, First, Middle Initial) B. Rhinehart's Oyster Bar		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 3051 Washington Road		Amount of Each Disbursement this Period 274.88
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4006
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	[MEMO ITEM] Event Catering
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 246 Robert C. Daniels Jr. Pkwy		Amount of Each Disbursement this Period 19.41
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4007
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	[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 46 OF 86			
	<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. Shane's Rib Shack		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 4446 Washington Road Suite 1		Amount of Each Disbursement this Period 1002.00
City Evans	State GA	
Zip Code 30809	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4008
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	[MEMO ITEM] Event Catering
State: District:		

Full Name (Last, First, Middle Initial) B. Party City		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 249 Robert C Daniel Jr Pkwy		Amount of Each Disbursement this Period 29.76
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4009
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	[MEMO ITEM] Event Costs
State: District:		

Full Name (Last, First, Middle Initial) c. Hilton Garden Inn		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 1065 Stevens Creek Road		Amount of Each Disbursement this Period 3000.00
City Augusta	State GA	
Zip Code 30907	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4010
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	[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 47 OF 86			
	<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. Hilton Garden Inn		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 1065 Stevens Creek Road		Amount of Each Disbursement this Period 50.00
City Augusta	State GA	
Zip Code 30907	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4011
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	[MEMO ITEM] Event Costs
State: District:		

Full Name (Last, First, Middle Initial) B. Card Services Center		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address PO Box 105025		Amount of Each Disbursement this Period 15.00
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4012
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	[MEMO ITEM] Annual Fee
State: District:		

Full Name (Last, First, Middle Initial) c. Card Services Center		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address PO Box 105025		Amount of Each Disbursement this Period 39.00
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4013
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	[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 48 OF 86			
	<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. Card Services Center		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address PO Box 105025		Amount of Each Disbursement this Period 8455.41
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-EX4067	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card Paid by Card Services Center
State: District:		

Full Name (Last, First, Middle Initial) B. NationBuilder		Date of Disbursement M M / D D / Y Y Y Y 12 / 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	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX4063	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Campaign Software
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 75.59
City Augusta	State GA	Zip Code 30909
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX4064	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Office Supplies
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8455.41
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 49 OF 86			
	<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. Everybody Loves Travel		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address 701 Brazos Street Suite 720		Amount of Each Disbursement this Period 2950.00
City Austin State TX Zip Code 78701	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4065
Candidate Name	Category/Type 001	[MEMO ITEM] Travel Fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

Full Name (Last, First, Middle Initial) B. Card Services Center		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address PO Box 105025		Amount of Each Disbursement this Period 39.00
City Atlanta State GA Zip Code 30348	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4066
Candidate Name	Category/Type 001	[MEMO ITEM] Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	
State: District:		

Full Name (Last, First, Middle Initial) c. Card Services Center		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address PO Box 105025		Amount of Each Disbursement this Period 972.29
City Atlanta State GA Zip Code 30348	Purpose of Disbursement Credit Card Paid by Card Services Center	Transaction ID : SB17-EX4074
Candidate Name	Category/Type 001	Credit Card Paid by Card Services Center
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	972.29
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 50 OF 86			
	<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. Rusty Pig		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address 600 N Main Street		Amount of Each Disbursement this Period 729.00
City Glennville	State GA	
Zip Code 30427	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4068
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Event Catering
State: District:		

Full Name (Last, First, Middle Initial) B. FedEx Office		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address 262 Robert C. Daniel Jr. Pkwy		Amount of Each Disbursement this Period 29.09
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4069
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Printing
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 26.99
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4070
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[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 51 OF 86			
	<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 12 / 31 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 153.34
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4071
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address 3675 Walton Way Extension		Amount of Each Disbursement this Period 3.87
City Augusta	State GA	
Zip Code 30909	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4072
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) c. Card Services Center		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address PO Box 105025		Amount of Each Disbursement this Period 30.00
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX4073
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016	[MEMO ITEM] Annual Fee
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 52 OF 86	
	<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 11 / 26 / 2014
Mailing Address 100 Luna Park Drive #156		Amount of Each Disbursement this Period 15360.00
City Alexandria State VA Zip Code 22305	Purpose of Disbursement Fundraising Fee	Transaction ID : SB17-EX3962
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	Fundraising Fee
State: District:		

Full Name (Last, First, Middle Initial) B. Richard & Delores Des Reis		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 748 Jones Creek		Amount of Each Disbursement this Period 1700.00
City Augusta State GA Zip Code 30907	Purpose of Disbursement Campaign Office Rent - November	Transaction ID : SB17-EX3960
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	Campaign Office Rent - November
State: District:		

Full Name (Last, First, Middle Initial) C. Richard & Delores Des Reis		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 748 Jones Creek		Amount of Each Disbursement this Period 1700.00
City Augusta State GA Zip Code 30907	Purpose of Disbursement Campaign Office Rent - December	Transaction ID : SB17-EX4038
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Campaign Office Rent - December
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	18760.00
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 53 OF 86			
	<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. Black Rock Group LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 66 Canal Center Plaza Suite 555		Amount of Each Disbursement this Period 7487.40
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Media Consulting	Transaction ID : SB17-EX3950
Candidate Name	Category/Type 001	
Office Sought: House Senate President	Disbursement For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2014 Debt	Media Consulting
State: District:		

Full Name (Last, First, Middle Initial) B. Georgia Power Co.		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2014
Mailing Address 96 Annex		Amount of Each Disbursement this Period 112.25
City Atlanta State GA Zip Code 30396	Purpose of Disbursement Office Utilities	Transaction ID : SB17-EX3983
Candidate Name	Category/Type 001	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Office Utilities
State: District:		

Full Name (Last, First, Middle Initial) c. Samuel C. Shepherd		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 1353 Story Mill Road		Amount of Each Disbursement this Period 791.58
City Waynesboro State GA Zip Code 30830	Purpose of Disbursement Net Salary	Transaction ID : SB17-EX3970
Candidate Name	Category/Type 001	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Net Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8391.23
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 54 OF 86			
	<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 12 / 12 / 2014
Mailing Address 1353 Story Mill Road		Amount of Each Disbursement this Period 75.80
City Waynesboro	State GA	Zip Code 30830
Purpose of Disbursement Reimbursement: See Below	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX4026
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Samuel C. Shepherd		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2014
Mailing Address 1353 Story Mill Road		Amount of Each Disbursement this Period 791.58
City Waynesboro	State GA	Zip Code 30830
Purpose of Disbursement Net Salary	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX4031
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Samuel C. Shepherd		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2014
Mailing Address 1353 Story Mill Road		Amount of Each Disbursement this Period 791.58
City Waynesboro	State GA	Zip Code 30830
Purpose of Disbursement Net Salary	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX4076
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	1658.96
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 55 OF 86	
	<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. Candidate Command LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 1420 NW Vivion Ste 113		Amount of Each Disbursement this Period 319.23
City Kansas City	State MO Zip Code 64118	
Purpose of Disbursement Phone Calls	Category/Type 001	Transaction ID : SB17-EX3951
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	State: District:	Phone Calls

Full Name (Last, First, Middle Initial) B. Strategic Advance Services LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 611 Pennsylvania Avenue SE #267		Amount of Each Disbursement this Period 4000.00
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Travel for Boehner Event	Category/Type 001	Transaction ID : SB17-EX3961
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	State: District:	Travel for Boehner Event

Full Name (Last, First, Middle Initial) c. Edgars Grille		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 3165 Washington Road		Amount of Each Disbursement this Period 3888.00
City Augusta	State GA Zip Code 30907	
Purpose of Disbursement Event Expenses	Category/Type 001	Transaction ID : SB17-EX3958
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	State: District:	Event Expenses

SUBTOTAL of Disbursements This Page (optional).....	8207.23
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 56 OF 86			
	<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. Air Charter Team Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2014	
Mailing Address 4151 N. Mulberry Drive Suite 250			Amount of Each Disbursement this Period 2943.08	
City Kansas City	State MO	Zip Code 64116	Transaction ID : SB17-EX3963	
Purpose of Disbursement Travel for Ryan Event		Category/ Type 001	Travel for Ryan Event	
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			
State: District:				

Full Name (Last, First, Middle Initial) B. Air Charter Team Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2014	
Mailing Address 4151 N. Mulberry Drive Suite 250			Amount of Each Disbursement this Period 3922.21	
City Kansas City	State MO	Zip Code 64116	Transaction ID : SB17-EX3964	
Purpose of Disbursement Travel for McCarthy Event		Category/ Type 001	Travel for McCarthy Event	
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			
State: District:				

Full Name (Last, First, Middle Initial) c. Gula Graham			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014	
Mailing Address 499 S. Capitol Street SW Suite 4			Amount of Each Disbursement this Period 632.22	
City Washington	State DC	Zip Code 20003	Transaction ID : SB17-EX4034	
Purpose of Disbursement Fundraising Expenses		Category/ Type 001	Fundraising Expenses	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	7497.51
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 57 OF 86	
	<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. Tim Baker		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2014
Mailing Address 903 Dewolfe Drive		Amount of Each Disbursement this Period 700.33
City Alexandria	State VA	
Zip Code 22308		Transaction ID : SB17-EX4046
Purpose of Disbursement Reimbursement: See Below	Category/ Type 001	
Candidate Name		Reimbursement: See Below
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2014
Mailing Address PO Box 433		Amount of Each Disbursement this Period 25.00
City Phoenix	State AZ	
Zip Code 85001		Transaction ID : SB17-EX4049
Purpose of Disbursement Travel	Category/ Type 001	
Candidate Name		[MEMO ITEM] Travel
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2014
Mailing Address PO Box 433		Amount of Each Disbursement this Period 25.00
City Phoenix	State AZ	
Zip Code 85001		Transaction ID : SB17-EX4050
Purpose of Disbursement Travel	Category/ Type 001	
Candidate Name		[MEMO ITEM] Travel
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	700.33
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 58 OF 86			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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. US Airways

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 433

City Phoenix State AZ Zip Code 85001

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 22 / 2014

Amount of Each Disbursement this Period: 326.20

Transaction ID : SB17-EX4051

[MEMO ITEM]
Airfare

B. Hertz Rent A Car

Full Name (Last, First, Middle Initial)
Mailing Address 14501 Hertz Quail Springs Park

City Oklahoma City State OK Zip Code 73134

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 22 / 2014

Amount of Each Disbursement this Period: 202.04

Transaction ID : SB17-EX4052

[MEMO ITEM]
Travel

C. Altria Client Services

Full Name (Last, First, Middle Initial)
Mailing Address 101 Constitution Avenue

City Washington State DC Zip Code 20001

Purpose of Disbursement Swearing-In Event Venue

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 31 / 2014

Amount of Each Disbursement this Period: 900.00

Transaction ID : SB17-EX4054

Swearing-In Event Venue

SUBTOTAL of Disbursements This Page (optional)..... 900.00

TOTAL This Period (last page this line number only)..... 153027.63

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-LN1

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
50000 .00 50000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

10

11

2011

01

08

2012

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-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:

07

11

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)..... 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)

Transaction ID : SC10-LN7

Rick W. Allen for Congress

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 250000	Cumulative Payment To Date .00	Balance Outstanding at Close of This Period 250000.00
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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

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-LN13

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
80000 30000.00 50000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 03 /

D 31 /

Y 2014 Y

M 01 /

D 01 /

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)..... 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 / D 24 / 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)..... 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

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-LN1018

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
110000 20000.00 90000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

10 / 20 / 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)..... ▶ 90000.00
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-LN1019

Rick W. Allen for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Richard Allen

[PERSONAL FUNDS]

Election: 2014

Primary

General

Other (specify) ▼

Mailing Address

2237 Pickens Rd

City

State

ZIP Code

Augusta

GA

30904

Original Amount of Loan

160000

Cumulative Payment To Date

.00

Balance Outstanding at Close of This Period

160000.00

TERMS

Date Incurred

10 / 27 / 2014

Date Due

01 / 01 / 2015

Interest Rate

0.00 % (apr)

Secured:

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)..... ▶

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-LN1020**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2016
Richard Allen Primary
 Mailing Address 2237 Pickens Rd General
 Other (specify) ▼

City State ZIP Code
 Augusta GA 30904

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
125000	.00	125000.00

TERMS Date Incurred Date Due Interest Rate Secured:
 M 11 / D 25 / Y 2014 M 01 / D 01 / Y 2016 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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	<input type="text" value="125000.00"/>
TOTALS This Period (last page in this line only).....	<input type="text" value="1125000.00"/>

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
Black Rock Group LLC

Mailing Address 66 Canal Center Plaza
Suite 555

City State Zip Code
Alexandria VA 22314

Nature of Debt (Purpose):
Invoice: Media Consulting

Outstanding Balance Beginning This Period **7487.40** Transaction ID : SD10-INV3757

Amount Incurred This Period **.00** Payment This Period **7487.40** Outstanding Balance at Close of This Period **.00**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DigitalXpress Printing

Mailing Address 2211 Beaver Ruin Road Ste 170

City State Zip Code
Norcross GA 30071

Nature of Debt (Purpose):
Invoice: Invitation Printing

Outstanding Balance Beginning This Period **2901.92** Transaction ID : SD10-INV3765

Amount Incurred This Period **.00** Payment This Period **2901.92** Outstanding Balance at Close of This Period **.00**

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DigitalXpress Printing

Mailing Address 2211 Beaver Ruin Road Ste 170

City State Zip Code
Norcross GA 30071

Nature of Debt (Purpose):
Invoice: Invitation Printing

Outstanding Balance Beginning This Period **727.12** Transaction ID : SD10-INV3767

Amount Incurred This Period **.00** Payment This Period **727.12** Outstanding Balance at Close of This Period **.00**

1) SUBTOTALS This Period This Page (optional)	0.00
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

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-INV3768	
<input type="text" value="1573.64"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="1573.64"/>	<input type="text" value=".00"/>

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	Transaction ID : SD10-INV3792	
<input type="text" value="15000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="15000.00"/>	<input type="text" value=".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	Transaction ID : SD10-INV3836	
<input type="text" value="234.60"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="234.60"/>	<input type="text" value=".00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
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 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	Transaction ID : SD10-INV3837	
<input type="text" value="2.97"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="2.97"/>	<input type="text" value=".00"/>

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	Transaction ID : SD10-INV3838	
<input type="text" value="12.46"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="12.46"/>	<input type="text" value=".00"/>

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-INV3839	
<input type="text" value="166.48"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="166.48"/>	<input type="text" value=".00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
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
Office Depot

Mailing Address 3675 Walton Way Extension

City State Zip Code
Augusta GA 30909

Nature of Debt (Purpose):
Invoice: Office Supplies

Outstanding Balance Beginning This Period **Transaction ID : SD10-INV3840**
225.78

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
.00 225.78 .00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Walmart

Mailing Address 1201 Knox Ave

City State Zip Code
North Augusta SC 29841

Nature of Debt (Purpose):
Invoice: Office Supplies

Outstanding Balance Beginning This Period **Transaction ID : SD10-INV3842**
14.28

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
.00 14.28 .00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Office Depot

Mailing Address 3675 Walton Way Extension

City State Zip Code
Augusta GA 30909

Nature of Debt (Purpose):
Invoice: Office Supplies

Outstanding Balance Beginning This Period **Transaction ID : SD10-INV3841**
248.40

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
.00 248.40 .00

1) SUBTOTALS This Period This Page (optional)	0.00
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

NAME OF COMMITTEE (In Full)

Rick W. Allen for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
USPS

Mailing Address 525 8th St

City State Zip Code
 Augusta GA 30901

Nature of Debt (Purpose):
 Invoice: Postage

Outstanding Balance Beginning This Period 234.00	Transaction ID : SD10-INV3843	
Amount Incurred This Period .00	Payment This Period 234.00	Outstanding Balance at Close of This Period .00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Shell Oil

Mailing Address 3744 Wheeler Road

City State Zip Code
 Augusta GA 30909

Nature of Debt (Purpose):
 Invoice: Fuel

Outstanding Balance Beginning This Period 88.11	Transaction ID : SD10-INV3844	
Amount Incurred This Period .00	Payment This Period 88.11	Outstanding Balance at Close of This Period .00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Holiday Inn

Mailing Address 455 Commerce Drive

City State Zip Code
 Statesboro GA 30461

Nature of Debt (Purpose):
 Invoice: Lodging

Outstanding Balance Beginning This Period 133.34	Transaction ID : SD10-INV3845	
Amount Incurred This Period .00	Payment This Period 133.34	Outstanding Balance at Close of This Period .00

1) SUBTOTALS This Period This Page (optional)	0.00
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

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	
<input type="text" value="1804.28"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="1804.28"/>	<input type="text" value=".00"/>

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	
<input type="text" value="75.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="75.00"/>	<input type="text" value=".00"/>

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	
<input type="text" value="66.50"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="66.50"/>	<input type="text" value=".00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
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)	PAGE 75 OF 86
	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 3841.06	Transaction ID : SD10-INV3848	
Amount Incurred This Period .00	Payment This Period 3841.06	Outstanding Balance at Close of This Period .00

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 1750.00	Transaction ID : SD10-INV3760	
Amount Incurred This Period .00	Payment This Period 1750.00	Outstanding Balance at Close of This Period .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 5031.89	Transaction ID : SD10-INV3761	
Amount Incurred This Period .00	Payment This Period 5031.89	Outstanding Balance at Close of This Period .00

1) SUBTOTALS This Period This Page (optional)	0.00
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

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	Transaction ID : SD10-INV3769	
<input type="text" value="3888.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="3888.00"/>	<input type="text" value=".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	Transaction ID : SD10-INV3806	
<input type="text" value="2943.08"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="2943.08"/>	<input type="text" value=".00"/>

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	Transaction ID : SD10-INV3849	
<input type="text" value="499.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="499.00"/>	<input type="text" value=".00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
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 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="400.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="400.00"/>	<input type="text" value=".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="29.66"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="29.66"/>	<input type="text" value=".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	Transaction ID : SD10-INV3851	
<input type="text" value="282.17"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="282.17"/>	<input type="text" value=".00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
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: Website - November

Mailing Address PO Box 7431

City State Zip Code
Columbia SC 29202

Outstanding Balance Beginning This Period

2000.00

Transaction ID : SD10-INV3798

Amount Incurred This Period

.00

Payment This Period

2000.00

Outstanding Balance at Close of This Period

.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

1700.00

Transaction ID : SD10-INV3799

Amount Incurred This Period

.00

Payment This Period

1700.00

Outstanding Balance at Close of This Period

.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

274.88

Transaction ID : SD10-INV3852

Amount Incurred This Period

.00

Payment This Period

274.88

Outstanding Balance at Close of This Period

.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) ▶

	0.00

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
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	
19.41		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
.00	19.41	.00

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	
1002.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
.00	1002.00	.00

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	
29.76		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
.00	29.76	.00

1) SUBTOTALS This Period This Page (optional)	0.00
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
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

3922.21

Transaction ID : SD10-INV3807

Amount Incurred This Period

.00

Payment This Period

3922.21

Outstanding Balance at Close of This Period

.00

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

3000.00

Transaction ID : SD10-INV3856

Amount Incurred This Period

.00

Payment This Period

3000.00

Outstanding Balance at Close of This Period

.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

50.00

Transaction ID : SD10-INV3857

Amount Incurred This Period

.00

Payment This Period

50.00

Outstanding Balance at Close of This Period

.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) ▶

0.00

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 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	Transaction ID : SD10-INV3858	
<input type="text" value="15.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="15.00"/>	<input type="text" value=".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	Transaction ID : SD10-INV3859	
<input type="text" value="39.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="39.00"/>	<input type="text" value=".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	Transaction ID : SD10-INV3759	
<input type="text" value="319.23"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="319.23"/>	<input type="text" value=".00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
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)	PAGE 82 OF 86
	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
William Wheat

Mailing Address PO Box 944

City State Zip Code
Langley SC 29834

Nature of Debt (Purpose):
Invoice: Net Win Bonus

Outstanding Balance Beginning This Period 3021.52	Transaction ID : SD10-INV3790	
Amount Incurred This Period .00	Payment This Period 3021.52	Outstanding Balance at Close of This Period .00

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: Net Win Bonus

Outstanding Balance Beginning This Period 8302.32	Transaction ID : SD10-INV3791	
Amount Incurred This Period .00	Payment This Period 8302.32	Outstanding Balance at Close of This Period .00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Internal Revenue Service

Mailing Address IRS Payment Center

City State Zip Code
Ogden UT 84201

Nature of Debt (Purpose):
Invoice: Taxes on Win Bonuses

Outstanding Balance Beginning This Period 8676.16	Transaction ID : SD10-INV3912	
Amount Incurred This Period .00	Payment This Period .00	Outstanding Balance at Close of This Period 8676.16

1) SUBTOTALS This Period This Page (optional)	8676.16
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

NAME OF COMMITTEE (In Full)

Rick W. Allen for Congress

A. 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	Transaction ID : SD10-INV3780	
<input type="text" value="322.50"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="322.50"/>	<input type="text" value=".00"/>

B. 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="25000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value=".00"/>	<input type="text" value="25000.00"/>

C. 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="10000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="10000.00"/>	<input type="text" value=".00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="25000.00"/>
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 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 25000.00	Transaction ID : SD10-INV3762	
Amount Incurred This Period .00	Payment This Period .00	Outstanding Balance at Close of This Period 25000.00

B. 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 4000.00	Transaction ID : SD10-INV3802	
Amount Incurred This Period .00	Payment This Period 4000.00	Outstanding Balance at Close of This Period .00

C. 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 25000.00	Transaction ID : SD10-INV3803	
Amount Incurred This Period .00	Payment This Period .00	Outstanding Balance at Close of This Period 25000.00

1) SUBTOTALS This Period This Page (optional)	50000.00
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

NAME OF COMMITTEE (In Full)

Rick W. Allen for Congress

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

B. 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	Transaction ID : SD10-INV3797	
<input type="text" value="739.43"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="739.43"/>	<input type="text" value=".00"/>

C. 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	Transaction ID : SD10-INV3805	
<input type="text" value="15360.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value=".00"/>	<input type="text" value="15360.00"/>	<input type="text" value=".00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
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

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

70.00

Transaction ID : SD10-INV3820

Amount Incurred This Period

.00

Payment This Period

.00

Outstanding Balance at Close of This Period

70.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

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)

70.00

2) **TOTALS** This Period (last page this line number only)

83746.16

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

1125000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

1208746.16