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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

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

Georgians for Isakson

ADDRESS (number and street) ▼ Post Office Box 250116

☐ Check if different than previously reported. (ACC)

CITY ▲ Atlanta STATE ▲ GA ZIP CODE ▲ 30325 -

2. **FEC IDENTIFICATION NUMBER ▼** C C00384693

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

STATE ▼ GA DISTRICT 00

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 MM 11 / DD 02 / YYYY 2010 in the State of GA

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

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

Election on MM 11 / DD 02 / YYYY 2010 in the State of GA

5. Covering Period MM 10 / DD 01 / YYYY 2009 through MM 12 / DD 31 / YYYY 2009

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 Jon Anderson

Signature of Treasurer [signature] Date 10 / 06 / 2011

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

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(Revised 02/2003)

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