

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Team Herschel, Inc			
ADDRESS (number and street) P.O. BOX 501707			
CITY ATLANTA	STATE GA	ZIP CODE 31150	
2. NAME OF CANDIDATE Walker, Herschel, , Mr.,		3. OFFICE SOUGHT (State and District) Senate GA	
4. FEC IDENTIFICATION NUMBER C00787853			
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			

A. FULL NAME ANGELL, GRAY, , ,			Name of Employer SELF	Date (month, day, year) 10/27/2022	Amount 1000.00
MAILING ADDRESS 190 JAMES WAY			Transaction ID : TX769704		
CITY ADVANCE	STATE NC	ZIP CODE 27006-8516	Occupation REAL ESTATE		
B. FULL NAME ARROLL, RICHARD, , ,			Name of Employer SELF-EMPLOYED	Date (month, day, year) 10/27/2022	Amount 1000.00
MAILING ADDRESS 2554 RIVERS			Transaction ID : TX769604		
CITY ATLANTA	STATE GA	ZIP CODE 30305-3548	Occupation REAL ESTATE		
C. FULL NAME BOURGEOIS, KENNY, , ,			Name of Employer RETIRED	Date (month, day, year) 10/27/2022	Amount 3000.00
MAILING ADDRESS 3085 COMMONWEALTH DR, APT 1022			Transaction ID : TX769711		
CITY SPRING HILL	STATE TN	ZIP CODE 37174-3124	Occupation RETIRED		
D. FULL NAME BOYCE, MICHAEL, , ,			Name of Employer PEAK INVESTMENTS,LLC	Date (month, day, year) 10/27/2022	Amount 1000.00
MAILING ADDRESS PO BOX 315			Transaction ID : TX769706		
CITY PONTE VEDRA BEACH	STATE FL	ZIP CODE 32004-0315	Occupation CHAIRMAN		
E. FULL NAME DICKINSON, WILLIAM, A., MR.,			Name of Employer WET WILLIES	Date (month, day, year) 10/27/2022	Amount 1000.00
MAILING ADDRESS 106 DUTCH ISLAND DRIVE			Transaction ID : TX769584		
CITY SAVANNAH	STATE GA	ZIP CODE 31406-3223	Occupation CEO		
SIGNATURE (optional) Purpura, Salvatore, , Mr.,			DATE 10/28/2022	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100	
[Electronically Filed]					

Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

FEC FORM 6
(Revised 03/2016)

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continuation page

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
HEWITT, BURT, , , 180 GIBBS RD CANTON GA 30115-7536	CBH CONTRACTING COMPANY, INC Transaction ID : TX769707 Occupation PRESIDENT	10/27/2022	1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE HOLMAN, WILLIAM, , , 250 BOXGROVE ROAD ALPHARETTA GA 30022-4440	Name of Employer HIGGINBOTHAM Transaction ID : TX769708 Occupation INSURANCE	Date (month, day, year) 10/27/2022	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE KORPAL, TERRENCE, , , 450 REDWOOD FOREST DRIVE BALLWIN MO 63021-5756	Name of Employer RETIRED Transaction ID : TX769596 Occupation RETIRED	Date (month, day, year) 10/27/2022	Amount 2000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE MCNALLY, MICHAEL, , , 3580 MISTLETOE LN. LONGBOAT KEY FL 34228-4102	Name of Employer RETIRED Transaction ID : TX769700 Occupation RETIRED	Date (month, day, year) 10/27/2022	Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE MUNS, MATT, , , 3041 FLAMINGO CIRCLE SOUTHLAKE TX 76092-2939	Name of Employer AGR, LLC Transaction ID : TX769710 Occupation BIZ CONSULTING	Date (month, day, year) 10/27/2022	Amount 2900.00

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE RUSK, RONALD, , , 25 SOUTH MAIN STREET YARDLEY PA 19067-1527			
Name of Employer RETIRED Transaction ID : TX769709 Occupation RETIRED		Date (month, day, year) 10/27/2022 Amount 1500.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE TURNBULL, JOHN, , , PO BOX 407 HUBBARD OR 97032-0407			
Name of Employer MEDIA MANAGER Transaction ID : TX770011 Occupation STRATEGIST		Date (month, day, year) 10/27/2022 Amount 2900.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Occupation		Date (month, day, year) Amount	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Occupation		Date (month, day, year) Amount	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer Occupation		Date (month, day, year) Amount	