

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 FRIENDS OF MCCORMICK				
ADDRESS (number and street) PO BOX 134				
CITY SUWANEE		STATE GA		ZIP CODE 30024
2. NAME OF CANDIDATE MCCORMICK, RICHARD, DEAN, ,			3. OFFICE SOUGHT (State and District) House GA 06	
4. FEC IDENTIFICATION NUMBER C00706747				
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				
A. FULL NAME ACSPA - SURGEONS PAC				
MAILING ADDRESS 20 F STREET NW SUITE 1000 CITY WASHINGTON DC 20001			Name of Employer Transaction ID : RNUSUQ28QHE5ZJA Occupation 	
			Date (month, day, year) 05/16/2022	
			Amount 1500.00	
B. FULL NAME BOLTON, G NILES, , ,				
MAILING ADDRESS 4735 HARRIS TRAIL NORTHWEST CITY ATLANTA GA 30327			Name of Employer NILES BOLTON ASSOCIATES Transaction ID : REN46ZSTUPMZS3S Occupation ARCHITECT	
			Date (month, day, year) 05/17/2022	
			Amount 1500.00	
C. FULL NAME DAWSON, JONATHAN, T, ,				
MAILING ADDRESS 6800 ELLEN CREEK ROAD #667 CITY TETON VILLAGE WY 83025			Name of Employer RETIRED Transaction ID : RKJD8QKUC9PS792 Occupation RETIRED	
			Date (month, day, year) 05/16/2022	
			Amount 2900.00	
D. FULL NAME DUNLAP, ROBERT, H, ,				
MAILING ADDRESS PO BOX 720 CITY BATESVILLE MS 38601			Name of Employer DUNLAP AND KYLE, CO. Transaction ID : RXD449HMAQ63SN9 Occupation CEO	
			Date (month, day, year) 05/16/2022	
			Amount 2900.00	
E. FULL NAME DUNLAP, ROBERT, H, ,				
MAILING ADDRESS PO BOX 720 CITY BATESVILLE MS 38601			Name of Employer DUNLAP AND KYLE, CO. Transaction ID : RXQMX3TAETE2M3F Occupation CEO	
			Date (month, day, year) 05/16/2022	
			Amount - 2000.00	
SIGNATURE (optional) CASAS, ANN, , , [Electronically Filed]				DATE 05/18/2022
For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100				

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			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE DUNLAP, ROBERT, H, , PO BOX 720 BATESVILLE MS 38601			
Name of Employer DUNLAP AND KYLE, CO.		Date (month, day, year) 05/16/2022	Amount 2000.00
Transaction ID : REY9NF3VYQHF5APSN6C			
Occupation CEO			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE FENDER, DANA, , , 4530 SAINT JOHNS AVENUE JACKSONVILLE FL 32210			
Name of Employer RETIRED		Date (month, day, year) 05/16/2022	Amount 2800.00
Transaction ID : REKVT3DUA6EFQ7E2N9W			
Occupation RETIRED			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE FENDER, HOPE, , , 4530 SAINT JOHNS AVENUE, STE 15 JACKSONVILLE FL 32210			
Name of Employer FENDER MANAGEMENT GROUP		Date (month, day, year) 05/16/2022	Amount 2800.00
Transaction ID : RVY6N3XSVTXJWSM492V			
Occupation BUSINESS			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE HARBIN, TOM, , , 3060 PEACHTREE ROAD NORTHWEST ATLANTA GA 30305			
Name of Employer SOURCE CAPITAL		Date (month, day, year) 05/17/2022	Amount 5800.00
Transaction ID : RBJXWWTUDCW5RR3XJG			
Occupation MANAGING PARTNER			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE MOODY, DAN, , , 605 BRISBAINE MANOR JOHNS CREEK GA 30022			
Name of Employer RETIRED		Date (month, day, year) 05/16/2022	Amount 5800.00
Transaction ID : R4QKQCKBU94MY7775MI			
Occupation RETIRED			

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FEC FORM 6
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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE MOODY, DAN, , , 605 BRISBAINE MANOR JOHNS CREEK GA 30022		Name of Employer RETIRED Transaction ID : RHXVB9YGXBAPASBFU Occupation RETIRED Date (month, day, year) 05/16/2022 Amount - 2900.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE MOODY, STEPHANIE, , , 605 BRISBAINE MANOR JOHNS CREEK GA 30022		Name of Employer HOMEMAKER Transaction ID : R9WQ2QKP4SMQD236G9. Occupation HOMEMAKER Date (month, day, year) 05/16/2022 Amount 2900.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE NEMPAC PO BOX 619911 DALLAS TX 75261		Name of Employer Transaction ID : RRXVT53JWMM9NEGUXN Occupation Date (month, day, year) 05/16/2022 Amount 5000.00	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE WINRED PO BOX 9891 ARLINGTON VA 22219		Name of Employer Transaction ID : RHFMYDKE77D6AG5YYR7 Occupation Date (month, day, year) 05/17/2022 Amount 13455.00	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Occupation Date (month, day, year) Amount	