

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 BUDDY CARTER FOR CONGRESS				
ADDRESS (number and street) PO BOX 10570				
CITY SAVANNAH		STATE GA		ZIP CODE 31412-0770
2. NAME OF CANDIDATE CARTER, EARL LEROY, , ,			3. OFFICE SOUGHT (State and District) House GA 01	
4. FEC IDENTIFICATION NUMBER C00543967				
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				

A. FULL NAME MARSHALL, MURRAY, S., MR.,			Name of Employer ATLANTIC INVESTORS REAL ESTATE CO.		Date (month, day, year) 05/11/2022		Amount 1000.00	
MAILING ADDRESS 196 COFFEE POINTE DRIVE			Transaction ID : 61C8CEED63B054851					
CITY SAVANNAH		STATE GA		ZIP CODE 31419-3177		Occupation REALTOR		
B. FULL NAME AMERICAN SOCIETY OF PLASTIC SURGEONS PLASTYPAC			Name of Employer		Date (month, day, year) 05/11/2022		Amount 2500.00	
MAILING ADDRESS 444 E ALGONQUIN RD			Transaction ID : 6593D9476FFF541671					
CITY ARLINGTON HEIGHTS		STATE IL		ZIP CODE 60005-4654		Occupation		
C. FULL NAME BROWN, NATALIE, S, MRS.,			Name of Employer NONE		Date (month, day, year) 05/12/2022		Amount 2900.00	
MAILING ADDRESS 27 HASLEITERS RETREAT			Transaction ID : 636FEE8C55CE548C					
CITY SAVANNAH		STATE GA		ZIP CODE 31411-3108		Occupation HOMEMAKER		
D. FULL NAME BROWN, ALTON, , MR., JR.			Name of Employer RESOURCE LAND CONSULTANTS		Date (month, day, year) 05/12/2022		Amount 2100.00	
MAILING ADDRESS 27 HASLEITERS RETREAT			Transaction ID : 60B0F1D65C2D44129					
CITY SAVANNAH		STATE GA		ZIP CODE 31411-3108		Occupation ENVIRONMENTAL CONSULTANT		
E. FULL NAME BROWN, ALTON, , MR., JR.			Name of Employer RESOURCE LAND CONSULTANTS		Date (month, day, year) 05/12/2022		Amount 2900.00	
MAILING ADDRESS 27 HASLEITERS RETREAT			Transaction ID : 672416CCB1BD94031					
CITY SAVANNAH		STATE GA		ZIP CODE 31411-3108		Occupation ENVIRONMENTAL CONSULTANT		
SIGNATURE (optional) KILGORE, PAUL, , ,					DATE 05/13/2022		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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		4. FEC IDENTIFICATION NUMBER C00543967	
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A. FULL NAME, MAILING ADDRESS AND ZIP CODE CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION 601 PENNSYLVANIA AVE NW WASHINGTON DC 20004-2601			
Name of Employer		Date (month, day, year) 05/12/2022	Amount 2500.00
Transaction ID : 68111496DBBF04213A50			
Occupation			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE GENERAL MOTORS COMPANY PAC (GM PAC) 25 MASSACHUSETTS AVE NW STE 400 WASHINGTON DC 20001-1427			
Name of Employer		Date (month, day, year) 05/12/2022	Amount 2500.00
Transaction ID : 6FECCD4F245E647F0BEF			
Occupation			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE EMPLOYEES OF RAYTHEON TECHNOLOGIES CORPORATION PAC 1101 PENNSYLVANIA AVE NW FL 10 WASHINGTON DC 20004-2566			
Name of Employer		Date (month, day, year) 05/12/2022	Amount 2000.00
Transaction ID : 6479922BF524A4465AAD			
Occupation			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE NATIONAL EMERGENCY MEDICINE PAC (NEMPAC) PO BOX 619911 DALLAS TX 75261-9911			
Name of Employer		Date (month, day, year) 05/12/2022	Amount 1500.00
Transaction ID : 6BB50CDEAFDA0476D86E			
Occupation			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE PAC OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS--PAC OF AAOS 317 MASSACHUSETTS AVE NE FL 1 WASHINGTON DC 20002-5769			
Name of Employer		Date (month, day, year) 05/12/2022	Amount 1000.00
Transaction ID : 600960D6DF90B4E71BCA			
Occupation			

continuation page

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE AMERICAN SPORTFISHING ASSOCIATION PAC 1001 N FAIRFAX ST STE 501 ALEXANDRIA VA 22314-1587			
Name of Employer		Date (month, day, year) 05/12/2022	
Amount 1000.00		Transaction ID : 6361BD15F709D43ACABC	
Occupation			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	
Amount		Occupation	
Occupation			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	
Amount		Occupation	
Occupation			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	
Amount		Occupation	
Occupation			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	
Amount		Occupation	
Occupation			