

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

COMMITTEE TO ELECT JOHN STONE

ADDRESS (number and street) 13016 Belle Meade Lane

Check if different than previously reported. (ACC)

Markham

VA

22643

2. **FEC IDENTIFICATION NUMBER** ▼

C C00444422

CITY ▲

STATE ▲

ZIP CODE ▲

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

STATE ▼ DISTRICT

GA

12

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] / [DD] / [YYYY] in the State of []

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

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

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period

[MM] / [DD] / [YYYY] 10 / 01 / 2013

through

[MM] / [DD] / [YYYY] 12 / 31 / 2013

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 Mr. JOHN ERWIN II Erwin STONE II

Signature of Treasurer Mr. JOHN ERWIN II Erwin STONE II [Electronically Filed] Date

[MM] / [DD] / [YYYY] 04 / 28 / 2014

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

Office Use Only										
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

COMMITTEE TO ELECT JOHN STONE

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))....	67865.00	134859.50
(b) Total Contribution Refunds (from Line 20(d))	0.00	250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	67865.00	134609.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	68599.19	96419.75
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	68599.19	96419.75
8. Cash on Hand at Close of Reporting Period (from Line 27).....	41596.29	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	38532.75	

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

COMMITTEE TO ELECT JOHN STONE

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).....	21400.00	52555.00
(ii) Unitemized.....	46464.00	74703.50
(iii) TOTAL of contributions from individuals ▶	67864.00	127258.50
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	7600.00
(d) The Candidate.....	1.00	1.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	67865.00	134859.50
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	2902.73
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	2902.73
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	67865.00	137762.23

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	68599.19	96419.75
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	1021.98	1021.98
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	1021.98	1021.98
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	250.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	69621.17	97691.73

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	43352.46
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	67865.00
25. SUBTOTAL (add Line 23 and Line 24).....	111217.46
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	69621.17
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	41596.29

**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 39
	<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)
COMMITTEE TO ELECT JOHN STONE

A. Full Name (Last, First, Middle Initial)
DR JAMES ABELL SR

Mailing Address 7102 WELLS PKWY

City State Zip Code
UNIVERSITY PARK MD 20782

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

Name of Employer Occupation
SELF EMPLOYED DOCTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 07 / 2013

Transaction ID : SA11AI.7805

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Jeff C. Annis

Mailing Address 549 Cedar Rock Drive

City State Zip Code
Martinez GA 30907

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

Name of Employer Occupation
Advanced Services Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 23 / 2013

Transaction ID : SA11AI.10963

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Associated Equipment Distributors, PAC

Mailing Address 121 Henry Street

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00010124

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 19 / 2013

Transaction ID : SA11AI.10994

Amount of Each Receipt this Period
1000.00

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

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

1650.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT JOHN STONE

A. Full Name (Last, First, Middle Initial)
MR FRANK BAIO

Mailing Address 1810 W 7TH ST

City State Zip Code
BROOKLYN NY 11223

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

Name of Employer Occupation
NONE NOT EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 18 2013

Transaction ID : SA11A1.7917

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Kimberly Bellissimo

Mailing Address 1155 15th St. NW
Suite 410

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
Base Connect President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 06 2013

Transaction ID : SA11A1.10970

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR ARTHUR BIRNEY

Mailing Address 888 17TH ST NW

City State Zip Code
WASHINGTON DC 20006

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 09 2013

Transaction ID : SA11A1.8028

Amount of Each Receipt this Period
250.00

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 39
	<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)
COMMITTEE TO ELECT JOHN STONE

A. Full Name (Last, First, Middle Initial)
Elton Brooks

Mailing Address 402 South Peterson Ave.

City Douglas State GA Zip Code 31533

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

Name of Employer Self Occupation Auto Parts

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 01 / 2013

Transaction ID : SA11AI.11086

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Mrs. Richard Chambers

Mailing Address 4434 Columbia RD

City Martinez State GA Zip Code 30909

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

Name of Employer Self Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 30 / 2013

Transaction ID : SA11AI.11896

Amount of Each Receipt this Period
 400.00
 In-kind - Office Space

C. Full Name (Last, First, Middle Initial)
Mrs. Richard Chambers

Mailing Address 4434 Columbia RD

City Martinez State GA Zip Code 30909

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

Name of Employer Self Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11AI.11898

Amount of Each Receipt this Period
 400.00
 In-kind - Office Space

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 8 OF 39
	<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)
COMMITTEE TO ELECT JOHN STONE

A. Full Name (Last, First, Middle Initial)
MRS JANE CHOATE

Mailing Address 18 CHERRYWOOD RD

City State Zip Code
LOCUST VALLEY NY 11560

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

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 27 / 2013

Transaction ID : SA11AI.8251

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS ELLOINE M CLARK III

Mailing Address 3716 MAPLEWOOD AVE

City State Zip Code
DALLAS TX 75205

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2013

Transaction ID : SA11AI.8253

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Billy Dasher

Mailing Address PO Box 60

City State Zip Code
Springfield GA 31329

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

Name of Employer Occupation
Dawsher Insurance (self) Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 01 / 2013

Transaction ID : SA11AI.11002

Amount of Each Receipt this Period
500.00

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

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

3600.00

**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 39
	<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)
COMMITTEE TO ELECT JOHN STONE

A. Full Name (Last, First, Middle Initial)
Samuel Dipolito

Mailing Address 106 Oak Ridge Dr.

City Statesboro State GA Zip Code 30458

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

Name of Employer Dipolito Realty Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 06 / 2013

Transaction ID : SA11AI.10968

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Carol Echols

Mailing Address 2312 Silverdale Road

City Augusta State GA Zip Code 30906

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 23 / 2013

Transaction ID : SA11AI.10961

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Richard H. Fender

Mailing Address 3421 Camak Drive

City Augusta State GA Zip Code 30909

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

Name of Employer Augusta RV Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 12 / 2013

Transaction ID : SA11AI.10972

Amount of Each Receipt this Period
 1000.00

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 39
	<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)
COMMITTEE TO ELECT JOHN STONE

A. Full Name (Last, First, Middle Initial)
RUSSELL FILER

Mailing Address 13057 CALIFORNIA ST

City YUCAIPA State CA Zip Code 92399

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11AI.8581

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
GENE FISCARELLI

Mailing Address 5020 W MOCKINGBIRD LN

City MC NEAL State AZ Zip Code 85617

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : SA11AI.8584

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
MR ALFRED GUIMARRA

Mailing Address 412 N KANAI DR

City PORTERVILLE State CA Zip Code 93257

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 11 / 2013

Transaction ID : SA11AI.8785

Amount of Each Receipt this Period
 250.00

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

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

1350.00

**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 39
	<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)
COMMITTEE TO ELECT JOHN STONE

A. Full Name (Last, First, Middle Initial)
CAPT TATNALL LEA HILLMAN

Mailing Address 504 W BLEEKER ST

City ASPEN State CO Zip Code 81611

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

Name of Employer US MILITARY Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.8939

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
MR WALLACE HILLMAN

Mailing Address 3603 CEDAR LN

City ROANOKE State VA Zip Code 24018

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 09 / 2013

Transaction ID : SA11AI.8937

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Evan S. Howell

Mailing Address PO Box 55753

City Houston State TX Zip Code 77255

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

Name of Employer Evan Howell Real Estate Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 03 / 2013

Transaction ID : SA11AI.10980

Amount of Each Receipt this Period
750.00

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 12 OF 39
	<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)
COMMITTEE TO ELECT JOHN STONE

Full Name (Last, First, Middle Initial) Alice S. Hunt		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2013
Mailing Address 2337 Ruby Drive		Transaction ID : SA11AI.10960
City Augusta	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) JOSEPH W JANICK		Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 2533 E BERYL AVE		Transaction ID : SA11AI.9065
City PHOENIX	State AZ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Walter H. Massingale		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 5027 Bryant Cove Drive		Transaction ID : SA11AI.10944
City Evans	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Georgia Bank & Trust	Occupation Vice President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1400.00
TOTAL This Period (last page this line number only).....	

**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 39
	<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)
COMMITTEE TO ELECT JOHN STONE

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

Mailing Address PO Box 14967

City Augusta State GA Zip Code 30919

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

Name of Employer Amelia Investments Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2013

Transaction ID : SA11AI.10950

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Thomas W. Minnick

Mailing Address 3673 Old Salem Lane

City Marshall State VA Zip Code 20115

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

Name of Employer National Counseling Group, Inc. Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2013

Transaction ID : SA11AI.10976

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
MS FRANCIS MORSE

Mailing Address 4181 FORT JIM RD

City PLACERVILLE State CA Zip Code 95667

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

Name of Employer best effort Occupation best effort

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.9665

Amount of Each Receipt this Period
 100.00

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

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

650.00

**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 39
	<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)
COMMITTEE TO ELECT JOHN STONE

A. Full Name (Last, First, Middle Initial)
Tommy Pennington

Mailing Address 1814 Lumpkin Road

City Augusta State GA Zip Code 30906

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

Name of Employer Pennington Power Products Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 05 / 2013

Transaction ID : SA11AI.10992

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Stephen W. Poteet

Mailing Address 18 Plantation Hills Drive

City Evans State GA Zip Code 30809

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

Name of Employer Poteet Funeral Home Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 06 / 2013

Transaction ID : SA11AI.10988

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
PAUL SEEGRS

Mailing Address 12720 HILLCREST RD STE 530

City DALLAS State TX Zip Code 75230

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2013

Transaction ID : SA11AI.10119

Amount of Each Receipt this Period
 500.00

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

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

1500.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 15 OF 39

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NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT JOHN STONE

A. Full Name (Last, First, Middle Initial)
CHARLES H SIMPSON

Mailing Address 3104 MERION DR

City State Zip Code
 MIRAMAR BEACH FL 32550

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

Name of Employer Occupation
 Magna Carta Group LLC Managing Member

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : SA11AI.10180

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
MR WILLIAM B SNYDER

Mailing Address 555 5TH AVE NE PH 2

City State Zip Code
 SAINT PETERSBURG FL 33701

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

Name of Employer Occupation
 NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2013

Transaction ID : SA11AI.10246

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
MRS CORINNE SPENCE

Mailing Address 2921 LAUREL DR

City State Zip Code
 SACRAMENTO CA 95864

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

Name of Employer Occupation
 NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 15 / 2013

Transaction ID : SA11AI.10270

Amount of Each Receipt this Period
 500.00

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

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

3600.00

21400.00

**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 39
	<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)
COMMITTEE TO ELECT JOHN STONE

A. Full Name (Last, First, Middle Initial)
Mr. JOHN ERWIN II Erwin STONE II

Mailing Address 4228 MATCH POINT DR

City State Zip Code
AUGUSTA GA 30909

FEC ID number of contributing federal political committee. **C H8GA12011**

Name of Employer Occupation
John Stone for Congress Congressional Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2908.73

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		05		2013

Transaction ID : SA11D.11029

Amount of Each Receipt this Period
1.00

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

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

Amount of Each Receipt this Period

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

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

1.00

1.00

**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 17 OF 39	
	<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)
COMMITTEE TO ELECT JOHN STONE

Full Name (Last, First, Middle Initial) A. Base Connect, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 1155 15th Street, NW Suite 410		Amount of Each Disbursement this Period 53571.89 Transaction ID : SB17.10703
City Washington State DC Zip Code 20005	Purpose of Disbursement Fundraising Mailing Expenses 003 Category/Type	
Candidate Name Mr. JOHN ERWIN II Erwin STONE II		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Beaver Creek Plantation		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 25 Olliff Town Rd		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.10788
City Twin City State GA Zip Code 30471	Purpose of Disbursement Fundraising Event Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address S. Capitol Street		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.10800
City Washington State DC Zip Code 20515	Purpose of Disbursement Fundraising Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	54196.89
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 18 OF 39			
	<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)
COMMITTEE TO ELECT JOHN STONE

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013		
Mailing Address S. Capitol Street			Amount of Each Disbursement this Period 864.77		
City Washington	State DC	Zip Code 20515	Transaction ID : SB17.10801		
Purpose of Disbursement Fundraising		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Mrs. Richard Chambers			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2013		
Mailing Address 4434 Columbia RD			Amount of Each Disbursement this Period 400.00		
City Martinez	State GA	Zip Code 30909	Transaction ID : SB17.11897		
Purpose of Disbursement In-kind - Office Space		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Mrs. Richard Chambers			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013		
Mailing Address 4434 Columbia RD			Amount of Each Disbursement this Period 400.00		
City Martinez	State GA	Zip Code 30909	Transaction ID : SB17.11899		
Purpose of Disbursement In-kind - Office Space		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	864.77
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 19 OF 39	
	<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)
COMMITTEE TO ELECT JOHN STONE

Full Name (Last, First, Middle Initial) A. Chevron		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2013
Mailing Address Hwy 17		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.10804
City Thomson	State GA Zip Code 30824	
Purpose of Disbursement Travel Expense/gas	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Community Endorsement Team		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 164 Robin Hood Drive		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.10808
City Douglasville	State GA Zip Code 30134	
Purpose of Disbursement Fundraising	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Brian Connor		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 108 Berrien Court		Amount of Each Disbursement this Period 2800.00 Transaction ID : SB17.10793
City Martinez	State GA Zip Code 30907	
Purpose of Disbursement Campaign Signs	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3420.00
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 20 OF 39	
	<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)
COMMITTEE TO ELECT JOHN STONE

Full Name (Last, First, Middle Initial) A. Craig Hawkins		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 5686 Wood Valley Road		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.10812
City Thomson State GA Zip Code 30824	Purpose of Disbursement Admin/Office Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Kangaroo Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 3539 Wheeler Road		Amount of Each Disbursement this Period 72.99 Transaction ID : SB17.10757
City Augusta State GA Zip Code 30909	Purpose of Disbursement Travel Expense/gas	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Matt MacKowiak		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 807 Brazos Street Suite 810		Amount of Each Disbursement this Period 690.00 Transaction ID : SB17.10850
City Austin State TX Zip Code 78701	Purpose of Disbursement Political Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1012.99
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 21 OF 39	
	<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)
COMMITTEE TO ELECT JOHN STONE

Full Name (Last, First, Middle Initial) A. Matt MacKowiak		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 807 Brazos Street Suite 810		Amount of Each Disbursement this Period 680.00 Transaction ID : SB17.10851
City Austin State TX Zip Code 78701	Purpose of Disbursement Political Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address 3675 Walton Way Ext.		Amount of Each Disbursement this Period 32.38 Transaction ID : SB17.10865
City Augusta State GA Zip Code 30909	Purpose of Disbursement Admin/Office Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 3675 Walton Way Ext.		Amount of Each Disbursement this Period 106.87 Transaction ID : SB17.10758
City Augusta State GA Zip Code 30909	Purpose of Disbursement Admin/Office Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	819.25
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 22 OF 39	
	<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)
COMMITTEE TO ELECT JOHN STONE

Full Name (Last, First, Middle Initial) A. Sconyer's BBQ		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 2250 Sconyer's Way		Amount of Each Disbursement this Period 1374.30
City Augusta	State GA	
Zip Code 30906	Purpose of Disbursement Campaign Event	Transaction ID : SB17.10747
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Megan Seda		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2013
Mailing Address 4434 Columbia Road		Amount of Each Disbursement this Period 1000.00
City Evans	State GA	
Zip Code 30809	Purpose of Disbursement Political Consulting	Transaction ID : SB17.10856
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Megan Seda		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 4434 Columbia Road		Amount of Each Disbursement this Period 1000.00
City Evans	State GA	
Zip Code 30809	Purpose of Disbursement Political Consulting	Transaction ID : SB17.10855
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3374.30
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 23 OF 39	
	<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)
COMMITTEE TO ELECT JOHN STONE

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address PO Box 5029		Amount of Each Disbursement this Period 50.50
City Wallingford	State CT Zip Code 06492	
Purpose of Disbursement Admin/Office Supplies	Candidate Name	Transaction ID : SB17.10912
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address PO Box 5029		Amount of Each Disbursement this Period 53.99
City Wallingford	State CT Zip Code 06492	
Purpose of Disbursement Admin/Office Supplies	Candidate Name	Transaction ID : SB17.10913
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Verizon		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2013
Mailing Address PO Box 5029		Amount of Each Disbursement this Period 137.13
City Wallingford	State CT Zip Code 06492	
Purpose of Disbursement Admin/Office Supplies	Candidate Name	Transaction ID : SB17.10914
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	241.62
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 24 OF 39	
	<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)
COMMITTEE TO ELECT JOHN STONE

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address PO Box 5029		Amount of Each Disbursement this Period 122.25 Transaction ID : SB17.10915
City Wallingford State CT Zip Code 06492	Purpose of Disbursement Admin/Office Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address PO Box 5029		Amount of Each Disbursement this Period 50.75 Transaction ID : SB17.10916
City Wallingford State CT Zip Code 06492	Purpose of Disbursement Admin/Office Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address PO Box 5029		Amount of Each Disbursement this Period 50.75 Transaction ID : SB17.10917
City Wallingford State CT Zip Code 06492	Purpose of Disbursement Admin/Office Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	122.25
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 39	
	<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)
COMMITTEE TO ELECT JOHN STONE

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address PO Box 5029		Amount of Each Disbursement this Period 90.00
City Wallingford	State CT Zip Code 06492	
Purpose of Disbursement Admin/Office Supplies	Candidate Name	Transaction ID : SB17.10918
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address PO Box 5029		Amount of Each Disbursement this Period 136.34
City Wallingford	State CT Zip Code 06492	
Purpose of Disbursement Admin/Office Supplies	Candidate Name	Transaction ID : SB17.10919
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Verizon		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address PO Box 5029		Amount of Each Disbursement this Period 50.75
City Wallingford	State CT Zip Code 06492	
Purpose of Disbursement Admin/Office Supplies	Candidate Name	Transaction ID : SB17.10920
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	277.09
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 39	
	<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)
COMMITTEE TO ELECT JOHN STONE

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address PO Box 5029		Amount of Each Disbursement this Period 70.75
City Wallingford	State CT Zip Code 06492	
Purpose of Disbursement Admin/Office Supplies	Candidate Name	Transaction ID : SB17.10921
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address PO Box 5029		Amount of Each Disbursement this Period 20.00
City Wallingford	State CT Zip Code 06492	
Purpose of Disbursement Admin/Office Supplies	Candidate Name	Transaction ID : SB17.10922
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Walmart		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 260 Bobby Jones Expwy		Amount of Each Disbursement this Period 52.06
City Augusta	State GA Zip Code 30907	
Purpose of Disbursement Admin/Office Supplies	Candidate Name	Transaction ID : SB17.10927
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	142.81
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 39	
	<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)
COMMITTEE TO ELECT JOHN STONE

Full Name (Last, First, Middle Initial) A. Walmart		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 260 Bobby Jones Expwy		Amount of Each Disbursement this Period 112.24
City Augusta	State GA	
Zip Code 30907	Purpose of Disbursement Admin/Office Supplies	Transaction ID : SB17.10928
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Walmart		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 260 Bobby Jones Expwy		Amount of Each Disbursement this Period 42.64
City Augusta	State GA	
Zip Code 30907	Purpose of Disbursement Admin/Office Supplies	Transaction ID : SB17.10929
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Walmart		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 260 Bobby Jones Expwy		Amount of Each Disbursement this Period 21.32
City Augusta	State GA	
Zip Code 30907	Purpose of Disbursement Admin/Office Supplies	Transaction ID : SB17.10933
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	176.20
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 39		
	<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)
COMMITTEE TO ELECT JOHN STONE

Full Name (Last, First, Middle Initial) A. WBPI-TV49		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address 1750 Knox Ave		Amount of Each Disbursement this Period 350.00
City North Augusta	State SC Zip Code 29841	
Purpose of Disbursement Admin/Office Supplies	Candidate Name	Transaction ID : SB17.10935
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	64998.17

**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 39	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
COMMITTEE TO ELECT JOHN STONE

Full Name (Last, First, Middle Initial) A. Mr. JOHN ERWIN II Erwin STONE II		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 4228 MATCH POINT DR		Amount of Each Disbursement this Period 457.98 Transaction ID : SB19A.11018
City AUGUSTA State GA Zip Code 30909	Purpose of Disbursement Retire load acquired 04/15/13 Category/Type 002	
Candidate Name COMMITTEE TO ELECT JOHN STONE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: GA District: 12		

Full Name (Last, First, Middle Initial) B. Mr. JOHN ERWIN II Erwin STONE II		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 4228 MATCH POINT DR		Amount of Each Disbursement this Period 564.00 Transaction ID : SB19A.11016
City AUGUSTA State GA Zip Code 30909	Purpose of Disbursement Paid out loan acquired 5/22/2013 Category/Type 002	
Candidate Name COMMITTEE TO ELECT JOHN STONE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: GA District: 12		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1021.98
TOTAL This Period (last page this line number only).....	1021.98

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 : **SC/10.4102**

COMMITTEE TO ELECT JOHN STONE

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

[PERSONAL FUNDS]

Election: 2008

John Erwin Stone II

Primary

General

Other (specify) ▼

Mailing Address

13016 Belle Meade Lance

City

State

ZIP Code

Markham

VA

22643

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

100.00

0.00

100.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 05 /

D 01 /

Y 2010 Y

M /

D /

Y 21/31/2012 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)..... ▶

100.00

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) **COMMITTEE TO ELECT JOHN STONE** Transaction ID : **SC/10.4113**

LOAN SOURCE Full Name (Last, First, Middle Initial) John Erwin Stone II	[PERSONAL FUNDS]	Election: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 13016 Belle Meade Lance		

City	State	ZIP Code
Markham	VA	22643

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100.00	0.00	100.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	08 / 10 / 2010	12/31/2013	% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	▶	100.00
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 : SC/10.4114

COMMITTEE TO ELECT JOHN STONE

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

[PERSONAL FUNDS]

Election: 2008

John Erwin Stone II

Primary
 General
 Other (specify) ▼

Mailing Address

13016 Belle Meade Lance

City

State

ZIP Code

Markham

VA

22643

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

200.00

0.00

200.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09

08

2010

12/31/2010

% (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)..... ▶

200.00

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) **COMMITTEE TO ELECT JOHN STONE** Transaction ID : **SC/10.4124**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012
John Erwin Stone II Primary
 Mailing Address 13016 Belle Meade Lance General
 Other (specify) ▼

City State ZIP Code
 Markham VA 22643

Original Amount of Loan 600.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 600.00
-----------------------------------	------------------------------------	---

TERMS Date Incurred Date Due Interest Rate Secured:
 M 12 / D 01 / Y 2011 M M / D D / Y 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: <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).....
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 : SC/10.4253

COMMITTEE TO ELECT JOHN STONE

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

[PERSONAL FUNDS]

Election: 2014

Mr. JOHN ERWIN II Erwin STONE II

Primary

General

Other (specify) ▼

Mailing Address

4228 MATCH POINT DR

City

State

ZIP Code

AUGUSTA

GA

30909

Original Amount of Loan

457.98

Cumulative Payment To Date

457.98

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M 04 / D 15 / Y 2013 Y

Date Due

M M / D D / Y 12/31/14 Y

Interest Rate

6.00 % (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)..... ▶

0.00

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) **COMMITTEE TO ELECT JOHN STONE** Transaction ID : **SC/10.4254**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Mr. JOHN ERWIN II Erwin STONE II** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
4228 MATCH POINT DR

City State ZIP Code
AUGUSTA GA 30909

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
758.00	0.00	758.00

TERMS

Date Incurred: M 05 / D 08 / Y 2013
 Date Due: M / D / Y 12/31/14
 Interest Rate: 6.00 % (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: <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).....

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) **COMMITTEE TO ELECT JOHN STONE** Transaction ID : **SC/10.4255**

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2014
Mr. JOHN ERWIN II Erwin STONE II
 Primary
 General
 Other (specify) ▼

Mailing Address
 4228 MATCH POINT DR
 City State ZIP Code
 AUGUSTA GA 30909

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
564.00	564.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
05 / 22 / 2013	12/31/2014	6.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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="0.00"/>
TOTALS This Period (last page in this line only).....	<input type="text"/>

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) **COMMITTEE TO ELECT JOHN STONE** Transaction ID : **SC/10.4256**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Mr. JOHN ERWIN II Erwin STONE II** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
4228 MATCH POINT DR

City State ZIP Code
AUGUSTA GA 30909

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
894.26	0.00	894.26

TERMS

Date Incurred: M 05 / D 31 / Y 2013
 Date Due: M / D / Y 12/31/2014
 Interest Rate: 6.00 % (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: <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).....

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) **COMMITTEE TO ELECT JOHN STONE** Transaction ID : **SC/10.4257**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Mr. JOHN ERWIN II Erwin STONE II** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
4228 MATCH POINT DR

City State ZIP Code
AUGUSTA GA 30909

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
228.49	0.00	228.49

TERMS

Date Incurred: M 06 / D 22 / Y 2013
 Date Due: M / D / Y 12/31/2014
 Interest Rate: 6.00 % (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).....	▶	228.49
TOTALS This Period (last page in this line only).....	▶	2880.75

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)

COMMITTEE TO ELECT JOHN STONE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
John Erwin Stone II

Mailing Address 13016 Belle Meade Lance

City State Zip Code
Markham VA 22643

Nature of Debt (Purpose):
Carryover Loan Balance 2008

Outstanding Balance Beginning This Period **35552.00** Transaction ID : SD10.4112

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **35552.00**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
John Erwin Stone II

Mailing Address 13016 Belle Meade Lance

City State Zip Code
Markham VA 22643

Nature of Debt (Purpose):
FEC Fee

Outstanding Balance Beginning This Period **100.00** Transaction ID : SD10.4107

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **100.00**

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

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)	35652.00
2) TOTALS This Period (last page this line number only)	35652.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	2880.75
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	38532.75