

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

Crawford for Congress

ADDRESS (number and street)

PO Box 16956

Check if different than previously reported. (ACC)

JONESBORO

AR

72403

2. FEC IDENTIFICATION NUMBER ▼

C C00462374

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

AR

01

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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Matthew Knight

Signature of Treasurer Matthew Knight

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Crawford for Congress

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))....	86684.80	445128.62
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	86684.80	445128.62
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	57386.65	284209.81
(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)).....	57386.65	284209.81
8. Cash on Hand at Close of Reporting Period (from Line 27).....	333626.34	
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).....	0.00	

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

Crawford for Congress

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).....	21225.00	156237.06
(ii) Unitemized.....	10051.00	36884.65
(iii) TOTAL of contributions from individuals ▶	31276.00	193121.71
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	55408.80	252006.91
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	86684.80	445128.62
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
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)..... ▶	86684.80	445128.62

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	57386.65	284209.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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	0.00
21. OTHER DISBURSEMENTS	2000.00	43000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	59386.65	327209.81

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	306328.19
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	86684.80
25. SUBTOTAL (add Line 23 and Line 24).....	393012.99
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	59386.65
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	333626.34

**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 53
	<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)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
MR. DONALD BAILEY

Mailing Address 1224 S MAIN

City State Zip Code
JONESBORO AR 72401-4024

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

Name of Employer Occupation
LYON'S ENGRAVING OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 16 / 2013

Transaction ID : SA11.7338

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER BAUGH

Mailing Address 225 S CHURCH STREET SUITE B

City State Zip Code
JONESBORO AR 72401-2902

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

Name of Employer Occupation
BAUGH FINANCIAL GROUP FINANCIAL PLANNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 22 / 2013

Transaction ID : SA11.7211

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JEFF BRECKLEIN

Mailing Address 143 CR 743

City State Zip Code
JONESBORO AR 72401-7779

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

Name of Employer Occupation
HERITAGE BANK EXECUTIVE VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11.7152

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

1100.00

**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 6 OF 53
	<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)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
MR. JOSH BROWN

Mailing Address 2915 BROWNS LANE

City State Zip Code
JONESBORO AR 72401-7204

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

Name of Employer Occupation
HAAG BROWN COMMERCIAL REAL ESTATE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11.7171

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN D. CORRENTI

Mailing Address 336 STEEPLECHASE

City State Zip Code
COLUMBUS MS 39705-1286

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

Name of Employer Occupation
BIG RIVER, LLC EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 22 / 2013

Transaction ID : SA11.7225

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JERRY B. CRAFT

Mailing Address 2011 CRAFTS DRIVE

City State Zip Code
JONESBORO AR 72401-6189

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

Name of Employer Occupation
CRAFT GAS AND PROPANE CO. OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 16 / 2013

Transaction ID : SA11.7378

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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: PAGE 7 OF 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
COL. THOMAS J. DAVIS
 Mailing Address 409 HUNTCLIFF DR.
 City State Zip Code
 JONESBORO AR 72404-8802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PRUDENTIAL REALTY REAL ESTATE AGENT
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 700.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 16 2013
Transaction ID : SA11.7334
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID P. DOWD
 Mailing Address P.O. BOX 1111
 City State Zip Code
 WYNNE AR 72396-1111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CROSS COUNTY BANK BANKER
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 22 2013
Transaction ID : SA11.7234
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. MILA DUPWE
 Mailing Address 706 MORNING VIEW
 City State Zip Code
 JONESBORO AR 72404-8500
 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
 10 15 2013
Transaction ID : SA11.7147
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

950.00

**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 53
	<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)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL D. EAST

Mailing Address 35 ALTA VISTA COVE

City State Zip Code
MARION AR 72364-2200

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

Name of Employer Occupation
SELF FARMER

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
10 15 2013

Transaction ID : SA11.7149

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ALEC FARMER

Mailing Address 2705 TURTLE CREEK

City State Zip Code
JONESBORO AR 72404-6942

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

Name of Employer Occupation
FARMER ENTERPRISES REAL ESTATE DEVELOPER

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 : SA11.7170

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS E. FOWLER

Mailing Address 601 S CHURCH

City State Zip Code
JONESBORO AR 72401-3115

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

Name of Employer Occupation
FOWLER LAW FIRM 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
12 20 2013

Transaction ID : SA11.7429

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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: PAGE 9 OF 53
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
MR. JOHN FREEMAN

Mailing Address 21 PLANTATION OAKS

City State Zip Code
JONESBORO AR 72401-7071

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

Name of Employer Occupation
LIBERTY BANK BANK EXECUTIVE

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 : SA11.7156

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. LYNDA B. FREEMAN

Mailing Address 3605 AUGUSTA COVE

City State Zip Code
JONESBORO AR 72404-6825

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 : SA11.7157

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SCOTT GOWER

Mailing Address 2207 SHADY GROVE RD

City State Zip Code
STUTTGART AR 72160-6445

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

Name of Employer Occupation
RICELAND FOODS EXECUTIVE

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
12 / 16 / 2013

Transaction ID : SA11.7391

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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 10 OF 53
	<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)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
MR. OSCAR D. GRAY

Mailing Address 1302 PIGEON COVE

City: JONESBORO State: AR Zip Code: 72401-8352

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: 325.00

Date of Receipt: 10 / 30 / 2013

Transaction ID : SA11.7185

Amount of Each Receipt this Period: 25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. OSCAR D. GRAY

Mailing Address 1302 PIGEON COVE

City: JONESBORO State: AR Zip Code: 72401-8352

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: 325.00

Date of Receipt: 11 / 16 / 2013

Transaction ID : SA11.7204

Amount of Each Receipt this Period: 25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. OSCAR D. GRAY

Mailing Address 1302 PIGEON COVE

City: JONESBORO State: AR Zip Code: 72401-8352

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: 325.00

Date of Receipt: 12 / 15 / 2013

Transaction ID : SA11.7324

Amount of Each Receipt this Period: 25.00

CONTRIBUTION

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

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

75.00

**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 53
	<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)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
DR. WILLIAM ROBERT GREEN

Mailing Address 2408 SKYLINE POINTE

City State Zip Code
JONESBORO AR 72404-

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

Name of Employer Occupation
SELF EMPLOYED RADIOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11.7197

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GREG HAAG

Mailing Address 2953 WOODSPRINGS ROAD

City State Zip Code
JONESBORO AR 72404-9200

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

Name of Employer Occupation
HAAG BROWN COMMERCIAL 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
10 / 15 / 2013

Transaction ID : SA11.7161

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DON HARMON

Mailing Address 3800 PEBBLE BEACH DRIVE

City State Zip Code
JONESBORO AR 72404-6879

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

Name of Employer Occupation
THE HOME DECOR COMPANIES 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
10 / 15 / 2013

Transaction ID : SA11.7166

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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)	PAGE 12 OF 53
	<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)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
MS. SUZANNE HERZING

Mailing Address 1660 N PROSPECT AVE
UNIT 1009

City MILWAUKEE State WI Zip Code 53202-6706

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

Name of Employer HERZING UNIVERSITY Occupation CHANCELLOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11.7453

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MACINE HUGHES

Mailing Address 110 HARVESTER DRIVE

City JONESBORO State AR Zip Code 72401-5915

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
1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2013

Transaction ID : SA11.7178

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MACINE HUGHES

Mailing Address 110 HARVESTER DRIVE

City JONESBORO State AR Zip Code 72401-5915

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
1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11.7213

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

950.00

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

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

FOR LINE NUMBER: PAGE 13 OF 53
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
MR. JOHN D. JOHNSON
 Mailing Address 210 NAVY DR.
 City State Zip Code
 POCAHONTAS AR 72455-8824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF CATTLE RANCHER
 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 16 2013
Transaction ID : SA11.7340
 Amount of Each Receipt this Period
 150.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. MAZEN Y. KHALIL
 Mailing Address 3891 PLANTATION ESTATES DRIVE
 City State Zip Code
 JONESBORO AR 72404-6891
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF PHYSICIAN
 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 : SA11.7165
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. TRACEY KING
 Mailing Address 1015 LAYMAN DRIVE
 City State Zip Code
 JONESBORO AR 72404-9643
 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 Y
 10 15 2013
Transaction ID : SA11.7169
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

1150.00

**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 53
	<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)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
MR. HENRY S. KINSLOW

Mailing Address 139 WOODLAND DRIVE

City State Zip Code
EL DORADO AR 71730-3125

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

Name of Employer Occupation
SELF ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 22 / 2013

Transaction ID : SA11.7219

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DEANNE LANCASTER

Mailing Address 3007 SLOAN CIRCLE

City State Zip Code
JONESBORO AR 72404-0926

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
400.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2013

Transaction ID : SA11.7172

Amount of Each Receipt this Period
200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HERMAN MADDOX

Mailing Address 908 ROLLING FOREST DRIVE

City State Zip Code
JONESBORO AR 72404-0692

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

Name of Employer Occupation
SELF FARMER

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 / 31 / 2013

Transaction ID : SA11.7448

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

950.00

**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 15 OF 53
	<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)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
MRS. ELAINE MARSHALL

Mailing Address 500 W. WASHINGTON

City State Zip Code
JONESBORO AR 72401-2780

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

Name of Employer Occupation
PROFESSIONAL CREDIT MANAGMENT, INC. CLERICAL

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 / 21 / 2013

Transaction ID : SA11.7181

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. R. BRYANT MARSHALL

Mailing Address P.O. BOX 4034

City State Zip Code
JONESBORO AR 72403-4034

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

Name of Employer Occupation
MARSHALL & OWENS, P.A. ATTORNEY

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 / 21 / 2013

Transaction ID : SA11.7175

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STEVE MAY

Mailing Address 510 MELTON CIR

City State Zip Code
JONESBORO AR 72401-7184

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

Name of Employer Occupation
HERITAGE BANK CEO

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 / 20 / 2013

Transaction ID : SA11.7428

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

1000.00

**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 53
	<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)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
MR. MIKE MCCARTY

Mailing Address P.O. BOX 336

City OSCEOLA State AR Zip Code 72370-0336

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

Name of Employer SELF Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 29 / 2013

Transaction ID : SA11.7441

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. JOSEPH MCGRATH

Mailing Address 3004 BERKSHIRE COVE

City JONESBORO State AR Zip Code 72401-8087

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

Name of Employer NEA CLINIC Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11.7182

Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. JOSEPH MCGRATH

Mailing Address 3004 BERKSHIRE COVE

City JONESBORO State AR Zip Code 72401-8087

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

Name of Employer NEA CLINIC Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 16 / 2013

Transaction ID : SA11.7335

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

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: PAGE 17 OF 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
MR. KEITH MITCHELL

Mailing Address 100 LEGION STREET

City State Zip Code
KENNETT MO 63857-2620

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

Name of Employer Occupation
MITCHELL DRUG PHARMACIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 16 2013

Transaction ID : SA11.7350

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JIM MOORE

Mailing Address P.O. BOX 519

City State Zip Code
BAY AR 72411-0519

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

Name of Employer Occupation
MOORE FARMS 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
 11 22 2013

Transaction ID : SA11.7210

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DR. SUSAN J. MYSHKA

Mailing Address 2817 S CARAWAY

City State Zip Code
JONESBORO AR 72401-7305

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

Name of Employer Occupation
SELF EMPLOYED CHIROPRACTER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 22 2013

Transaction ID : SA11.7222

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

1200.00

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

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

FOR LINE NUMBER: PAGE 18 OF 53
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
MR. RAY OSMENT

Mailing Address 1203 DOVE ROAD

City State Zip Code
JONESBORO AR 72401-5273

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

Name of Employer Occupation
OSMENT, INC 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
 10 30 2013

Transaction ID : SA11.7184

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. DHARMENDRA V. PATEL

Mailing Address 3225 LACOSTE

City State Zip Code
JONESBORO AR 72404-6820

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

Name of Employer Occupation
NEA CLINIC PHYSICIAN

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 30 2013

Transaction ID : SA11.7186

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. BARRY PHILLIPS

Mailing Address P.O. BOX 19298

City State Zip Code
JONESBORO AR 72403-6698

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

Name of Employer Occupation
PHILLIPS INVESTMENT AND CONSTRUCTION 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
 10 21 2013

Transaction ID : SA11.7180

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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: PAGE 19 OF 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
DR. MARK E. REINER

Mailing Address **637 EAST MATTHEWS**

City **JONESBORO** State **AR** Zip Code **72401-3145**

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

Name of Employer **SELF** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11.7153

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. KEN E. SAVAGE

Mailing Address **2383 HINKLEY ROAD**

City **PROCTOR** State **AR** Zip Code **72376-9574**

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

Name of Employer **K. E SAVAGE FARM** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 22 / 2013

Transaction ID : SA11.7215

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. THOMAS SMITH

Mailing Address **808 E LAKESHORE**

City **JONESBORO** State **AR** Zip Code **72401-4379**

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

Name of Employer **HONEY BAKED HAM** Occupation **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
10 / 15 / 2013

Transaction ID : SA11.7159

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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 20 OF 53
	<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)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL TOOHEY

Mailing Address 47180 MIDDLE BLUFF PLACE

City POTOMAC FALLS State VA Zip Code 20165-3123

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

Name of Employer WATERWAYS COUNCIL INC Occupation PRESIDENT AND CEO

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 / 15 / 2013

Transaction ID : SA11.7323

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CARROLL TOWELL

Mailing Address PO BOX 728

City MANILA State AR Zip Code 72442-0728

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

Name of Employer TOWELL AND SON AUTO SALES Occupation OWNER

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
 12 / 16 / 2013

Transaction ID : SA11.7353

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. J. A. WAMPLER

Mailing Address 20179 HIGHWAY 64

City MCCRORY State AR Zip Code 72101-7616

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

Name of Employer SELF Occupation FARMER

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 / 16 / 2013

Transaction ID : SA11.7395

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

1100.00

**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 21 OF 53
	<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)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
MR. MARK V. WILLIAMSON

Mailing Address **5519 S. GRANDVIEW**

City **LITTLE ROCK** State **AR** Zip Code **72207-1915**

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

Name of Employer **MARK WILLIAMSON CO, INC** Occupation **INSURANCE AGENT**

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 / 16 / 2013

Transaction ID : SA11.7336

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. LINDA WOFFORD

Mailing Address **1105 ROXBURY NARROWS**

City **JONESBORO** State **AR** Zip Code **72401-6146**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

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 / 15 / 2013

Transaction ID : SA11.7455

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. TOM WOMACK

Mailing Address **P.O. BOX 3077**

City **JONESBORO** State **AR** Zip Code **72403-3077**

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

Name of Employer **WOMACK, PHELPS & MCNEILL** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 21 / 2013

Transaction ID : SA11.7173

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 22 OF 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
MR. R. G. WOODARD

Mailing Address **PO BOX 10**

City **CASH** State **AR** Zip Code **72421-0010**

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

Name of Employer **CASH RIVER VALLEY SEED COMPANY** Occupation **SEED DEALER**

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
11 / 05 / 2013

Transaction ID : SA11.7200

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. JUDY L. WORKMAN

Mailing Address **P.O. BOX 760**

City **PARAGOULD** State **AR** Zip Code **72451-0760**

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 22 / 2013

Transaction ID : SA11.7227

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GLENDON WORLOW

Mailing Address **3237 HWY 228**

City **WALNUT RIDGE** State **AR** Zip Code **72476-8731**

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

Name of Employer **SELF** Occupation **FARMER**

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
12 / 16 / 2013

Transaction ID : SA11.7376

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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 23 OF 53
	<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)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
R-G JOINT VENTURES LLC

Mailing Address 1215 REBSAMEN PARK ROAD

City Little Rock State AR Zip Code 72202-1819

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 Y
 12 / 15 / 2013

Transaction ID : SA11.7326

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GORDON GONDEK

Mailing Address 1215 REBSAMEN PARK ROAD

City Little Rock State AR Zip Code 72202-1819

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

Name of Employer Occupation
 R - G JOINT VENTURES LLC OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2013

Transaction ID : SA11.7331

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. ALLAN ROBERTS

Mailing Address 1215 REBSAMEN PARK RD

City Little Rock State AR Zip Code 72202-1819

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

Name of Employer Occupation
 R-G JOINT VENTURES LLC PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2013

Transaction ID : SA11.7330

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION
[MEMO ITEM]

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

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

500.00

21225.00

**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 24 OF 53
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
TIM GRIFFIN FOR CONGRESS CAMPAIGN COMMITTEE

Mailing Address P.O. BOX 7526

City: LITTLE ROCK State: AR Zip Code: 72217-7526

FEC ID number of contributing federal political committee: **C** C00468116

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 4000.00

Date of Receipt: 12 / 10 / 2013

Transaction ID : SA11.7312

Amount of Each Receipt this Period: 4000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TIM GRIFFIN FOR CONGRESS CAMPAIGN COMMITTEE

Mailing Address P.O. BOX 7526

City: LITTLE ROCK State: AR Zip Code: 72217-7526

FEC ID number of contributing federal political committee: **C** C00468116

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 4000.00

Date of Receipt: 12 / 10 / 2013

Transaction ID : SA11.7312B

Amount of Each Receipt this Period: -2000.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
TIM GRIFFIN FOR CONGRESS CAMPAIGN COMMITTEE

Mailing Address P.O. BOX 7526

City: LITTLE ROCK State: AR Zip Code: 72217-7526

FEC ID number of contributing federal political committee: **C** C00468116

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 4000.00

Date of Receipt: 12 / 10 / 2013

Transaction ID : SA11.7318

Amount of Each Receipt this Period: 2000.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

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

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

4000.00

**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 25 OF 53
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
ACTION COMMITTEE FOR RURAL ELECTRIFICATION (ACRE)

Mailing Address 4301 WILSON BOULEVARD

City ARLINGTON State VA Zip Code 22203-1867

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : SA11.7415

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN BUS ASSOCIATION (BUSPAC)

Mailing Address 111 K STREET, NE, 9TH FLR.

City WASHINGTON State DC Zip Code 20002-8110

FEC ID number of contributing federal political committee. **C** C00004879

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
 12 / 10 / 2013

Transaction ID : SA11.7315

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW
SUITE 600

City WASHINGTON State DC Zip Code 20036-3971

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2013

Transaction ID : SA11.7436

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

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

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

4000.00

**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 26 OF 53
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION PAC

Mailing Address 1891 PRESTON WHITE DRIVE

City RESTON State VA Zip Code 20191-4326

FEC ID number of contributing federal political committee. **C C00343459**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2013

Transaction ID : SA11.7431

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN KENNEL CLUB PAC

Mailing Address 260 MADISON AVENUE

City NEW YORK State NY Zip Code 10016-2401

FEC ID number of contributing federal political committee. **C C00441808**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2013

Transaction ID : SA11.7320

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN SUGAR CANE LEAGUE

Mailing Address PO DRAWER 938

City THIBODAUX State LA Zip Code 70302-0938

FEC ID number of contributing federal political committee. **C C00081414**

Name of Employer Occupation

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
 12 / 29 / 2013

Transaction ID : SA11.7435

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

4500.00

**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 27 OF 53
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF INTERVENTIONAL PAIN PHYSICIANS PAC

Mailing Address 2831 LONE OAK ROAD

City PADUCAH State KY Zip Code 42003-8041

FEC ID number of contributing federal political committee. **C** C00351197

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2013

Transaction ID : SA11.7437

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN WATERWAYS OPERATORS PAC

Mailing Address 801 N QUINCY STREET SUITE 200

City ARLINGTON State VA Zip Code 22203-1708

FEC ID number of contributing federal political committee. **C** C00034678

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
 10 / 30 / 2013

Transaction ID : SA11.7195

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ARVEST BANK GROUP, INC. PAC, INC.

Mailing Address P.O. BOX 799

City LOWELL State AR Zip Code 72745-0799

FEC ID number of contributing federal political committee. **C** C00336768

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 16 / 2013

Transaction ID : SA11.7209

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

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

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

8500.00

**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 28 OF 53
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
ASSOCIATED GENERAL CONTRACTORS OF AMERICA PAC

Mailing Address 2300 WILSON BLVD, SUITE 400

City ARLINGTON State VA Zip Code 22201-5426

FEC ID number of contributing federal political committee. **C** C00082917

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 Y
 12 / 29 / 2013

Transaction ID : SA11.7432

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AUTOMOTIVE AFTERMARKET PAC

Mailing Address 7101 WISCONSIN AVENUE, SUITE 1300

City BETHESDA State MD Zip Code 20814-4866

FEC ID number of contributing federal political committee. **C** C00250753

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 Y
 12 / 29 / 2013

Transaction ID : SA11.7433

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BAYER CORPORATION PAC

Mailing Address 100 BAYER ROAD

City PITTSBURGH State PA Zip Code 15205-9707

FEC ID number of contributing federal political committee. **C** C00281162

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 Y
 10 / 30 / 2013

Transaction ID : SA11.7193

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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: PAGE 29 OF 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
BNSF RAILPAC

Mailing Address P.O. BOX 961039

City State Zip Code
FORT WORTH TX 76161-0039

FEC ID number of contributing federal political committee. **C C00235739**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 20 2013

Transaction ID : SA11.7416

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BURGER KING FRANCHISEE PAC

Mailing Address 1701 BARRETT LAKES BLVD. NW SUITE

City State Zip Code
KENNESAW GA 30144-4561

FEC ID number of contributing federal political committee. **C C00329425**

Name of Employer Occupation

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
 11 22 2013

Transaction ID : SA11.7244

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHEMICAL PRODUCERS & DISTRIBUTORS ASSOC. PAC

Mailing Address 1730 RHODE ISLAND AVENUE NW SUITE

City State Zip Code
WASHINGTON DC 20036-3114

FEC ID number of contributing federal political committee. **C C00214809**

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
 11 22 2013

Transaction ID : SA11.7245

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 30 OF 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC

Mailing Address 228 S. WASHINGTON STREET STE 115

City State Zip Code
ALEXANDRIA VA 22314-5404

FEC ID number of contributing federal political committee. **C C00503680**

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 Y
12 / 10 / 2013

Transaction ID : SA11.7316

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CROPLIFE AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1156 15TH STREET NW SUITE 400

City State Zip Code
WASHINGTON DC 20005-1752

FEC ID number of contributing federal political committee. **C C00248849**

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 Y
10 / 21 / 2013

Transaction ID : SA11.7176

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CROPLIFE AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1156 15TH STREET NW SUITE 400

City State Zip Code
WASHINGTON DC 20005-1752

FEC ID number of contributing federal political committee. **C C00248849**

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 Y
10 / 21 / 2013

Transaction ID : SA11.7177

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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: PAGE 31 OF 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
CSX CORPORATION GOOD GOVERNMENT FUND

Mailing Address 1331 PENNSYLVANIA AVE, NW
SUITE 560, NATIONAL PLACE

City WASHINGTON State DC Zip Code 20004-1710

FEC ID number of contributing federal political committee. **C C00163832**

Name of Employer Occupation

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
12 / 15 / 2013

Transaction ID : SA11.7319

Amount of Each Receipt this Period
2000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DICKSTEIN SHAPIRO LLP PAC

Mailing Address 1825 I STREET NW

City WASHINGTON State DC Zip Code 20006-5403

FEC ID number of contributing federal political committee. **C C00110197**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2908.80

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 29 / 2013

Transaction ID : SA11.7438

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DICKSTEIN SHAPIRO LLP PAC

Mailing Address 1825 I STREET NW

City WASHINGTON State DC Zip Code 20006-5403

FEC ID number of contributing federal political committee. **C C00110197**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2908.80

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 19 / 2013

Transaction ID : SA11.7456

Amount of Each Receipt this Period
408.80
CONTRIBUTION

EVENT EXPENSES

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

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

4908.80

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

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

FOR LINE NUMBER: PAGE 32 OF 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
EXPERIAN NORTH AMERICA, INC PAC

Mailing Address 475 ANTON BLVD

City State Zip Code
COSTA MESA CA 92626-7037

FEC ID number of contributing federal political committee. **C C00379768**

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 Y
12 20 2013

Transaction ID : SA11.7417

Amount of Each Receipt this Period
1500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FLORIDA SUGAR CANE LEAGUE PAC

Mailing Address 1301 PENNSYLVANIA AVE NW STE 401

City State Zip Code
WASHINGTON DC 20004-1701

FEC ID number of contributing federal political committee. **C C00012328**

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 Y
11 05 2013

Transaction ID : SA11.7199

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GATX GOOD GOVERNMENT PROGRAM

Mailing Address 222 WEST ADAMS STREET

City State Zip Code
CHICAGO IL 60606-5312

FEC ID number of contributing federal political committee. **C C00118703**

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 Y
11 22 2013

Transaction ID : SA11.7246

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

3500.00

**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 33 OF 53
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC PAC

Mailing Address 1299 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004-2400

FEC ID number of contributing federal political committee. **C C00492223**

Name of Employer Occupation

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
 12 / 15 / 2013

Transaction ID : SA11.7321

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GREAT LAKES SUGARBEET GROWERS POLITICAL ACTION COMMITTEE

Mailing Address 2600 SOUTH EUCLID AVENUE

City BAY CITY State MI Zip Code 48706-3414

FEC ID number of contributing federal political committee. **C C00384354**

Name of Employer Occupation

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 : SA11.7192

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMM

Mailing Address 2121 CRYSTAL DRIVE SUITE 100

City ARLINGTON State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

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

Transaction ID : SA11.7191

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

5000.00

**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 34 OF 53
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
LORILLARD TOBACCO COMPANY PUBLIC AFFAIRS COMMITTEE

Mailing Address 714 GREEN VALLEY ROAD

City Greensboro State NC Zip Code 27408-7018

FEC ID number of contributing federal political committee. **C** C00112888

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2013

Transaction ID : SA11.7439

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MINN-DAK FARMERS COOPERATIVE POLITICAL ACTION COMMITTEE (MDF)

Mailing Address 7525 RED RIVER ROAD

City Wahpeton State ND Zip Code 58075-9705

FEC ID number of contributing federal political committee. **C** C00164939

Name of Employer Occupation

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 / 15 / 2013

Transaction ID : SA11.7146

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL STONE, SAND AND GRAVEL ASSOC. ROCKPAC

Mailing Address 1605 KING STREET

City Alexandria State VA Zip Code 22314-2726

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

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 : SA11.7194

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

4500.00

**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 35 OF 53
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL SORGHUM PRODUCERS PAC

Mailing Address 4201 N INTERSTATE 27

City LUBBOCK State TX Zip Code 79403-7507

FEC ID number of contributing federal political committee. **C** C00475673

Name of Employer Occupation

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 / 10 / 2013

Transaction ID : SA11.7314

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL STONE, SAND AND GRAVEL ASSOC. ROCKPAC

Mailing Address 1605 KING STREET

City ALEXANDRIA State VA Zip Code 22314-2726

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

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
 12 / 29 / 2013

Transaction ID : SA11.7434

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RAIN AND HAIL INSURANCE SOCIETY POLITICAL ACTION COMMITTEE

Mailing Address 9200 NORTHPARK DRIVE SUITE 300

City JOHNSTON State IA Zip Code 50131-3006

FEC ID number of contributing federal political committee. **C** C00279505

Name of Employer Occupation

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
 12 / 10 / 2013

Transaction ID : SA11.7313

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

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

2500.00

**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 36 OF 53
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 N MICHIGAN AVE

City CHICAGO State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

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
 12 / 31 / 2013

Transaction ID : SA11.7445

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SNAKE RIVER SUGAR COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1951 SOUTH SATURN WAY SUITE 100

City BOISE State ID Zip Code 83709-2924

FEC ID number of contributing federal political committee. **C** C00326389

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
 10 / 15 / 2013

Transaction ID : SA11.7145

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE

Mailing Address P.O. BOX 500

City RENVILLE State MN Zip Code 56284-0500

FEC ID number of contributing federal political committee. **C** C00166348

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
 11 / 16 / 2013

Transaction ID : SA11.7208

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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 37 OF 53
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Crawford for Congress

A. Full Name (Last, First, Middle Initial)
THE AMERICAN ELECTRIC POWER COMMITTEE FOR RESPONSIBLE GOVERN

Mailing Address **801 PENNSYLVANIA AVE, NW SUITE 320**

City **WASHINGTON** State **DC** Zip Code **20004-2684**

FEC ID number of contributing federal political committee. **C C00096842**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2013

Transaction ID : SA11.7322

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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 M / D D D / Y Y 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 M / D D D / Y Y 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).....

_____ **1000.00**

_____ **55408.80**

**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 38 OF 53	
	<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)
Crawford for Congress

Full Name (Last, First, Middle Initial) A. RICK CRAWFORD			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013	
Mailing Address P.O. BOX 16956			Amount of Each Disbursement this Period 75.21	
City JONESBORO	State AR	Zip Code 72403	Transaction ID : SB17.I870	
Purpose of Disbursement EXPENSE REIMBURSEMENT		Category/ Type	SEE BELOW	
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. VIVINT			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013	
Mailing Address 4931 N. 300 W			Amount of Each Disbursement this Period 75.21	
City PROVO	State UT	Zip Code 84604	Transaction ID : SB17.I887	
Purpose of Disbursement HOME SECURITY SYSTEM		Category/ Type	[MEMO ITEM]	
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. RICK CRAWFORD			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013	
Mailing Address P.O. BOX 16956			Amount of Each Disbursement this Period 75.21	
City JONESBORO	State AR	Zip Code 72403	Transaction ID : SB17.I888	
Purpose of Disbursement EXPENSE REIMBURSEMENT		Category/ Type	SEE BELOW	
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).....	150.42
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 39 OF 53			
	<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)
Crawford for Congress

Full Name (Last, First, Middle Initial) A. VIVINT		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address 4931 N. 300 W		Amount of Each Disbursement this Period 1850.00
City PROVO State UT Zip Code 84604	Purpose of Disbursement HOME SECURITY SYSTEM	
Candidate Name		Transaction ID : SB17.I889
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:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. AGRICULTURE COUNCIL OF ARKANSAS		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 1401 WEST CAPITAL AVENUE		Amount of Each Disbursement this Period 350.00
City LITTLE ROCK State AR Zip Code 72201	Purpose of Disbursement MEMBERSHIP	
Candidate Name		Transaction ID : SB17.I850
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. BSB SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 3538 SOUTH WAKEFIELD ST.		Amount of Each Disbursement this Period 1500.00
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement COMPLIANCE SERVICES	
Candidate Name		Transaction ID : SB17.I854
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1850.00
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 40 OF 53	
	<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)
Crawford for Congress

Full Name (Last, First, Middle Initial) A. BSB SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 3538 SOUTH WAKEFIELD ST.		Amount of Each Disbursement this Period 1500.00
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement COMPLIANCE SERVICES	
Candidate Name		Transaction ID : SB17.I859
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. BSB SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 3538 SOUTH WAKEFIELD ST.		Amount of Each Disbursement this Period 1755.16
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement COMPLIANCE SERVICES	
Candidate Name		Transaction ID : SB17.I862
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 300 FIRST STREET, SE		Amount of Each Disbursement this Period 236.85
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement EVENT FOOD AND BEVERAGE	
Candidate Name		Transaction ID : SB17.I858
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	3492.01
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 41 OF 53		
	<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)
Crawford for Congress

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 300 FIRST STREET, SE		Amount of Each Disbursement this Period 320.20 Transaction ID : SB17.I885
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement EVENT FOOD AND BEVERAGE	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. KLF & COMPANY		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 12100 RAINWOOD ROAD, #8		Amount of Each Disbursement this Period 2561.93 Transaction ID : SB17.I851
City LITTLE ROCK	State AR	
Zip Code 72212	Purpose of Disbursement FUNDRAISING CONSULTING	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. KLF & COMPANY		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 12100 RAINWOOD ROAD, #8		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.I860
City LITTLE ROCK	State AR	
Zip Code 72212	Purpose of Disbursement FUNDRAISING CONSULTING	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).....	4882.13
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 42 OF 53		
	<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)
Crawford for Congress

Full Name (Last, First, Middle Initial) A. KLF & COMPANY		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 12100 RAINWOOD ROAD, #8		Amount of Each Disbursement this Period 3007.44
City LITTLE ROCK	State AR	
Zip Code 72212	Purpose of Disbursement FUNDRAISING CONSULTING	Transaction ID : SB17.I864
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. KLF & COMPANY		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2013
Mailing Address 12100 RAINWOOD ROAD, #8		Amount of Each Disbursement this Period 7811.84
City LITTLE ROCK	State AR	
Zip Code 72212	Purpose of Disbursement FUNDRAISING CONSULTING	Transaction ID : SB17.I900
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. MCGUIREWOODS, LLP		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 2001 K STREET, NW SUITE 400		Amount of Each Disbursement this Period 214.00
City WASHINGTON	State DC	
Zip Code 20006	Purpose of Disbursement LEGAL SERVICES	Transaction ID : SB17.I848
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)	11033.28
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 43 OF 53		
	<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)
Crawford for Congress

Full Name (Last, First, Middle Initial) A. MCGUIREWOODS, LLP			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013		
Mailing Address 2001 K STREET, NW SUITE 400			Amount of Each Disbursement this Period 107.00		
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : SB17.I884		
Purpose of Disbursement LEGAL SERVICES		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. MCGUIREWOODS, LLP			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013		
Mailing Address 2001 K STREET, NW SUITE 400			Amount of Each Disbursement this Period 160.50		
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : SB17.I899		
Purpose of Disbursement LEGAL SERVICES		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. PIRYX, INC			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013		
Mailing Address 144 2ND STREET, 1ST FLOOR			Amount of Each Disbursement this Period 43.67		
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.I892		
Purpose of Disbursement CREDIT CARD PROCESSING FEES		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).....	311.17
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 44 OF 53	
	<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)
Crawford for Congress

Full Name (Last, First, Middle Initial) A. PLETH, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 2010 REYNOLDS STREET		Amount of Each Disbursement this Period 89.55 Transaction ID : SB17.I849
City BATESVILLE State AR Zip Code 72501	Purpose of Disbursement WEB SERVICES	
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. PLETH, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 2010 REYNOLDS STREET		Amount of Each Disbursement this Period 89.55 Transaction ID : SB17.I857
City BATESVILLE State AR Zip Code 72501	Purpose of Disbursement WEB SERVICES	
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. PLETH, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 2010 REYNOLDS STREET		Amount of Each Disbursement this Period 97.55 Transaction ID : SB17.I896
City BATESVILLE State AR Zip Code 72501	Purpose of Disbursement WEB SERVICES	
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).....	276.55
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 45 OF 53	
	<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)
Crawford for Congress

Full Name (Last, First, Middle Initial) A. SECURITY BANKCARD CENTER, INC.		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 1301.09
City TULSA	State OK	Zip Code 74121
Purpose of Disbursement CREDIT CARD PAYMENT	Category/ Type	
Candidate Name	Transaction ID : SB17.I872	
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)	SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 800.00
City FALLS CHURCH	State VA	Zip Code 22043
Purpose of Disbursement SOFTWARE	Category/ Type	
Candidate Name	Transaction ID : SB17.I873	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. TORTILLA COAST		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 400 FIRST STREET, SE		Amount of Each Disbursement this Period 34.38
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD AND BEVERAGE	Category/ Type	
Candidate Name	Transaction ID : SB17.I875	
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)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1301.09
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 46 OF 53			
	<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)
Crawford for Congress

Full Name (Last, First, Middle Initial) A. TORTILLA COAST			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 400 FIRST STREET, SE			Amount of Each Disbursement this Period 59.23
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement FOOD AND BEVERAGE		Category/ Type	Transaction ID : SB17.I880 [MEMO ITEM]
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. SECURITY BANKCARD CENTER, INC.			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address P.O. BOX 22116			Amount of Each Disbursement this Period 32.60
City TULSA	State OK	Zip Code 74121	
Purpose of Disbursement CREDIT CARD FINANCE CHARGE		Category/ Type	Transaction ID : SB17.I874 [MEMO ITEM]
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. SECURITY BANKCARD CENTER, INC.			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address P.O. BOX 22116			Amount of Each Disbursement this Period 1164.99
City TULSA	State OK	Zip Code 74121	
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type	Transaction ID : SB17.I876 SEE BELOW
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).....	1164.99
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 47 OF 53			
	<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)
Crawford for Congress

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 300 FIRST STREET, SE		Amount of Each Disbursement this Period 67.50
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement FOOD AND BEVERAGE	Transaction ID : SB17.I877
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 800.00
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement SOFTWARE	Transaction ID : SB17.I878
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. SECURITY BANKCARD CENTER, INC.		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address P.O. BOX 22116		Amount of Each Disbursement this Period 1644.97
City TULSA	State OK	
Zip Code 74121	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : SB17.I893
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)	SEE BELOW
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1644.97
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 48 OF 53		
	<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)
Crawford for Congress

A. CAPITOL HILL CLUB

Full Name (Last, First, Middle Initial)
Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
EVENT FOOD AND BEVERAGE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 10 / 2013

Amount of Each Disbursement this Period: 368.66

Transaction ID : SB17.I894

[MEMO ITEM]

B. CMDI

Full Name (Last, First, Middle Initial)
Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 10 / 2013

Amount of Each Disbursement this Period: 800.00

Transaction ID : SB17.I895

[MEMO ITEM]

C. TC PRINTING

Full Name (Last, First, Middle Initial)
Mailing Address 4150 EAST 43RD STREET

City LITTLE ROCK State AR Zip Code 72117

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 11 / 2013

Amount of Each Disbursement this Period: 997.93

Transaction ID : SB17.I882

SUBTOTAL of Disbursements This Page (optional) 997.93

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 49 OF 53	
	<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)
Crawford for Congress

Full Name (Last, First, Middle Initial) A. TRIUMPH CAMPAIGNS		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address P.O. BOX 12243		Amount of Each Disbursement this Period 11000.00 Transaction ID : SB17.I855
City JACKSON State MS Zip Code 39236	Purpose of Disbursement POLITICAL STRATEGY 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. UNISOURCE DIRECT		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address P.O. BOX 82		Amount of Each Disbursement this Period 7919.97 Transaction ID : SB17.I847
City WATERTOWN State WI Zip Code 53094	Purpose of Disbursement DIRECT MAIL EXPENSE	
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. UNITED STATES POST OFFICE		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2013
Mailing Address 2404 RACE STREET		Amount of Each Disbursement this Period 88.00 Transaction ID : SB17.I897
City JONESBORO State AR Zip Code 72401	Purpose of Disbursement PO BOX FEE	
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).....	19007.97
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 50 OF 53			
	<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)
Crawford for Congress

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 7101 DEMOCRACY BLVD.			Amount of Each Disbursement this Period 365.36 Transaction ID : SB17.I890
City BETHESDA	State MD	Zip Code 20817	
Purpose of Disbursement CELL PHONE SERVICE		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 WIRELESS			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 7101 DEMOCRACY BLVD.			Amount of Each Disbursement this Period 365.37 Transaction ID : SB17.I891
City BETHESDA	State MD	Zip Code 20817	
Purpose of Disbursement CELL PHONE SERVICE		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 WIRELESS			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2013
Mailing Address 7101 DEMOCRACY BLVD.			Amount of Each Disbursement this Period 365.19 Transaction ID : SB17.I898
City BETHESDA	State MD	Zip Code 20817	
Purpose of Disbursement CELL PHONE SERVICE		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).....	1095.92
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 51 OF 53			
	<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)
Crawford for Congress

Full Name (Last, First, Middle Initial) A. WINFREY & COMPANY		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 228 S WASHINGTON STREET SUITE B-20		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.I853
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement FUNDRAISING 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. WINFREY & COMPANY		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 228 S WASHINGTON STREET SUITE B-20		Amount of Each Disbursement this Period 2772.92 Transaction ID : SB17.I861
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement FUNDRAISING 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) C. WINFREY & COMPANY		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 228 S WASHINGTON STREET SUITE B-20		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.I863
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement FUNDRAISING 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).....	6772.92
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 52 OF 53			
	<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)
Crawford for Congress

Full Name (Last, First, Middle Initial) A. WINFREY & COMPANY			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013		
Mailing Address 228 S WASHINGTON STREET SUITE B-20			Amount of Each Disbursement this Period 1685.40		
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement FUNDRAISING CONSULTING		Transaction ID : SB17.I883		
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. DICKSTEIN SHAPIRO LLP PAC			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013		
Mailing Address 1825 I STREET NW			Amount of Each Disbursement this Period 408.80		
City WASHINGTON State DC Zip Code 20006-5403	Purpose of Disbursement IN-KIND CONTRIBUTION		Transaction ID : SB17.7456		
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)		OFFICE RENTAL AND CATERING		
State: District:					

Full Name (Last, First, Middle Initial) C. REPUBLICAN PARTY OF ARKANSAS			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013		
Mailing Address 1201 WEST SIXTH STREET			Amount of Each Disbursement this Period 1000.00		
City LITTLE ROCK State AR Zip Code 72201	Purpose of Disbursement EVENT TICKETS		Transaction ID : SB17.I846		
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).....	3094.20
TOTAL This Period (last page this line number only).....	57075.65

**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 53 OF 53	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Crawford for Congress

Full Name (Last, First, Middle Initial) A. FRIENDS OF FRANK GUINTA		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 1850 ELM STREET		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.I856
City MANCHESTER State NH Zip Code 03104	Purpose of Disbursement CANDIDATE CONTRIBUTION	
Candidate Name Frank Guinta	Category/Type	
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: NH District: 01		

Full Name (Last, First, Middle Initial) B. MIKE COFFMAN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 4650 S YOSEMITE ST F2 #511		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.I881
City GREENWOOD VILLAGE State CO Zip Code 80111	Purpose of Disbursement CANDIDATE CONTRIBUTION	
Candidate Name Mike Coffman	Category/Type	
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: CO District: 06		

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	Category/Type	
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).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00