

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

TAYLOR GRIFFIN FOR CONGRESS

ADDRESS (number and street) ▼

310 VILLAGE GREEN DRIVE

Check if different than previously reported. (ACC)

NEW BERN

NC

28562

2. **FEC IDENTIFICATION NUMBER** ▼

C C00581314

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

NC

03

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 / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 HENRY CLARK WARD

Signature of Treasurer HENRY CLARK WARD

[Electronically Filed]

Date

/ /

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
TAYLOR GRIFFIN 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))....	105445.00	222869.00
(b) Total Contribution Refunds (from Line 20(d))	500.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	104945.00	222369.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	59742.11	71212.49
(b) Total Offsets to Operating Expenditures (from Line 14).....	1306.76	1306.76
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	58435.35	69905.73
8. Cash on Hand at Close of Reporting Period (from Line 27).....	152463.27	
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

TAYLOR GRIFFIN 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).....	80950.00	184250.00
(ii) Unitemized.....	995.00	3119.00
(iii) TOTAL of contributions from individuals ▶	81945.00	187369.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	23500.00	35500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	105445.00	222869.00
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.)	1306.76	1306.76
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)..... ▶	106751.76	224175.76

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	59742.11	71212.49
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	500.00	500.00
(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)).....	500.00	500.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	60242.11	71712.49

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	105953.62
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	106751.76
25. SUBTOTAL (add Line 23 and Line 24).....	212705.38
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	60242.11
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	152463.27

**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 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MC ANDREWS

Mailing Address 1565 44TH ST NW

City State Zip Code
WASHINGTON DC 20007

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

Name of Employer Occupation
VIANOVO SENIOR STRATEGIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.883

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
WHITAKER ASKEW

Mailing Address 1809 STIRRUP LN

City State Zip Code
ALEXANDRIA VA 22308

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

Name of Employer Occupation
AMERICAN GAMING ASSOCIATION VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : SA11AI.859

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
BRIAN BAKER

Mailing Address 4821 V ST NW

City State Zip Code
WASHINGTON DC 20007

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

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.876

Amount of Each Receipt this Period
500.00

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 6 OF 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM BLALOCK

Mailing Address 609 WEST BRADDOCK ROAD

City State Zip Code
ALEXANDRIA VA 22302

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

Name of Employer Occupation
FIERCE GOVERNMENT RELATIONS LOBBYIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA11AI.829

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
LEONARD BLAVATNIK

Mailing Address 730 5TH AVE 20TH FL

City State Zip Code
NEW YORK NY 10019

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

Name of Employer Occupation
ACCESS INDUSTRIES CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2015

Transaction ID : SA11AI.771

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
LEONARD BLAVATNIK

Mailing Address 730 5TH AVE 20TH FL

City State Zip Code
NEW YORK NY 10019

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

Name of Employer Occupation
ACCESS INDUSTRIES CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2015

Transaction ID : SA11AI.772

Amount of Each Receipt this Period
2700.00

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

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

5900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KIRSTEN CHADWICK

Mailing Address 601 PRESIDENT FORD LN

City State Zip Code
ALEXANDRIA VA 22302

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

Name of Employer Occupation
FIERCE GOVERNMENT RELATIONS CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 / 2015

Transaction ID : SA11AI.872

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
FAITH CLEETER

Mailing Address 1212 POPLAR GROVE DR

City State Zip Code
ATLANTA GA 30306

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

Name of Employer Occupation
CITI SVP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 12 / 2015

Transaction ID : SA11AI.839

Amount of Each Receipt this Period
250.00

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

Mailing Address 139 TRENT SHORES DR.

City State Zip Code
TRENT WOODS NC 28562

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

Name of Employer Occupation
DACEY PUBLIC AFFAIRS, INC. GOVERNMENT RELATIONS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 14 / 2015

Transaction ID : SA11AI.841

Amount of Each Receipt this Period
500.00

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 8 OF 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NOVA DALY

Mailing Address 7906 ROSWELL DR

City Falls Church State VA Zip Code 22043

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

Name of Employer WILEY REIN LLP Occupation CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : SA11AI.858

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
DOUGLAS DAVENPORT

Mailing Address 3721 NORTH VERMONT ST

City ARLINGTON State VA Zip Code 22207

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

Name of Employer SELF EMPLOYED Occupation PUBLIC AFFAIRS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : SA11AI.842

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
JOHN M DUNCAN

Mailing Address 1207 INDEPENDENCE AVE SE

City WASHINGTON State DC Zip Code 20003

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

Name of Employer SELF-EMPLOYED Occupation LOBBYIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 10 / 2015

Transaction ID : SA11AI.834

Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 9 OF 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRENT ELLMERS

Mailing Address 122 KINGSWAY DRIVE

City State Zip Code
DUNN NC 28334

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

Name of Employer Occupation
WAYNE MEMORIAL HOSPITAL PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11AI.869

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
DONALD EVANS

Mailing Address PO BOX 50990

City State Zip Code
MIDLAND TX 79710

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

Name of Employer Occupation
SELF-EMPLOYED INVESTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 15 2015

Transaction ID : SA11AI.773

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
JOHN H FISH

Mailing Address 1016 MASSACHUSETTS AVE NE

City State Zip Code
WASHINGTON DC 20002

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

Name of Employer Occupation
REYNOLDS AMERICAN, INC. GOVERNMENT RELATIONS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 30 2015

Transaction ID : SA11AI.862

Amount of Each Receipt this Period
2700.00

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

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

5200.00

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

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

FOR LINE NUMBER: PAGE 10 OF 47
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THEODORE H FRANK

Mailing Address 1302 WAUGH DR.
#830

City HOUSTON State TX Zip Code 77019

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

Name of Employer CEI Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 25 / 2015

Transaction ID : SA11A1.860

Amount of Each Receipt this Period
 800.00

Amount of Each Receipt this Period
 1800.00

B. Full Name (Last, First, Middle Initial)
SIMONE FRIEDMAN

Mailing Address 1875 CONNECTICUT AVE NW, 10TH FLR

City WASHINGTON State DC Zip Code 20009

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

Name of Employer J. FRIEDMAN PHILANTHROPIES Occupation MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 10 / 2015

Transaction ID : SA11A1.832

Amount of Each Receipt this Period
 2700.00

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
EMANUEL J FRIEDMAN

Mailing Address 2330 CALIFORNIA ST NW

City WASHINGTON State DC Zip Code 20008

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

Name of Employer EJF CAPITAL Occupation FINANCE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11A1.868

Amount of Each Receipt this Period
 2700.00

Amount of Each Receipt this Period
 2700.00

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

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

6200.00

**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 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KEVIN I FROMER

Mailing Address 4825 QUEBEC ST NW

City State Zip Code
WASHINGTON DC 20016

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

Name of Employer Occupation
HSBC NORTH AMERICA VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 23 / 2015

Transaction ID : SA11AI.854

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JOYCE GATES

Mailing Address 4135 SEMINARY RD

City State Zip Code
ALEXANDRIA VA 22304

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : SA11AI.837

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
BRUCE GATES

Mailing Address 4135 SEMINARY RD

City State Zip Code
ALEXANDRIA VA 22304

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

Name of Employer Occupation
ALTRIA SVP EXTERNAL AFFAIRS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 11 / 2015

Transaction ID : SA11AI.838

Amount of Each Receipt this Period
2700.00

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

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

5650.00

**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 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SAM GEDULDIG

Mailing Address 1001 PENNSYLVANIA AVE NW
STE 750 SOUTH

City WASHINGTON State DC Zip Code 20004

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

Name of Employer CLARK, LYTLE, AND GEDULDIG Occupation PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2015

Transaction ID : SA11AI.826

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
SHERRI L. GIORGIO

Mailing Address 311 WHITWORTH WAY

City NASHVILLE State TN Zip Code 37205

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

Name of Employer ABBVIE Occupation DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 10 / 2015

Transaction ID : SA11AI.835

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MARK HANLEY

Mailing Address 833 22ND ST. S

City ARLINGTON State VA Zip Code 22202

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

Name of Employer ANADARKO Occupation MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : SA11AI.853

Amount of Each Receipt this Period
250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOSHUA C HOLLY

Mailing Address 825 S MONROE ST

City ARLINGTON State VA Zip Code 22204

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

Name of Employer THE PODESTA GROUP Occupation GOVERNMENT AND PUBLIC RELATIONS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.875

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
TIM KEELER

Mailing Address 9505 ROCKPORT RD.

City VIENNA State VA Zip Code 22180

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

Name of Employer MAYER BROWN Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.820

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
TIM KEELER

Mailing Address 9505 ROCKPORT RD.

City VIENNA State VA Zip Code 22180

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

Name of Employer MAYER BROWN Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2015

Transaction ID : SA11AI.851

Amount of Each Receipt this Period
 250.00

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 14 OF 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

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

Mailing Address 600 MADISON AVE 20TH FL

City State Zip Code
NEW YORK NY 10022

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

Name of Employer Occupation
PORTAGE ADVISORS INVESTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : SA11AI.786

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
JULIE LINN

Mailing Address 3001 SALE ST #324

City State Zip Code
DALLAS TX 75219

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

Name of Employer Occupation
GREAT HEARTS TEXAS SVP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : SA11AI.844

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DANIEL S. LOEB

Mailing Address 390 PARK AVE 18TH FLOOR

City State Zip Code
NEW YORK NY 10022

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

Name of Employer Occupation
THIRD POINT LLC INVESTMENT MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.790

Amount of Each Receipt this Period
2700.00

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

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

5650.00

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

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

FOR LINE NUMBER: PAGE 15 OF 47
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DANIEL S. LOEB

Mailing Address 390 PARK AVE
18TH FLOOR

City State Zip Code
NEW YORK NY 10022

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

Name of Employer Occupation
THIRD POINT LLC INVESTMENT MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 10 2015

Transaction ID : SA11AI.791

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
DAVID LUCHT

Mailing Address 5612 MAXWELL PLACE

City State Zip Code
WILMINGTON NC 28409

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

Name of Employer Occupation
LIVE OAK BANK BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 24 2015

Transaction ID : SA11AI.823

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
JEAN S MAMO

Mailing Address 2122 MASSACHUSETTS AVE. NW
APT. 408

City State Zip Code
WASHINGTON DC 20008

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

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 11 2015

Transaction ID : SA11AI.792

Amount of Each Receipt this Period
500.00

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

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

4200.00

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

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

FOR LINE NUMBER: PAGE 16 OF 47
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DANIELLE MAURER

Mailing Address 5040 36TH ST N

City ARLINGTON State VA Zip Code 22207

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

Name of Employer FIERCE GOVERNMENT RELATIONS Occupation GOVERNMENT RELATIONS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : SA11AI.848

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
JOSHUA NADELL

Mailing Address 28 CAYUGA WAY

City SHORT HILLS State NJ Zip Code 07078

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

Name of Employer ELLIOTT MANAGEMENT CORPORATION Occupation CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : SA11AI.770

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
KYLE NEVINS

Mailing Address 1325 D ST NE

City WASHINGTON State DC Zip Code 20002

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

Name of Employer HARBINGER STRATEGIES Occupation CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : SA11AI.847

Amount of Each Receipt this Period
 500.00

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

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

4200.00

**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 17 OF 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL O'BRIEN

Mailing Address 3700 WOODBINE STREET

City State Zip Code
CHEVY CHASE MD 20815

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

Name of Employer Occupation
PWC EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 19 / 2015

Transaction ID : SA11AI.821

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
TEA NADEZDA Z POLLOCK

Mailing Address 111 W 67TH ST.

City State Zip Code
NEW YORK NY 10023

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 19 / 2015

Transaction ID : SA11AI.816

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
TEA NADEZDA Z POLLOCK

Mailing Address 111 W 67TH ST.

City State Zip Code
NEW YORK NY 10023

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 19 / 2015

Transaction ID : SA11AI.817

Amount of Each Receipt this Period
2700.00

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

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

5900.00

**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 18 OF 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JONATHAN D POLLOCK

Mailing Address 111 W 67TH ST.

City State Zip Code
NEW YORK NY 10023

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

Name of Employer Occupation
ELLIOTT MANAGEMENT CORP EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 19 / 2015

Transaction ID : SA11AI.814

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
JONATHAN D POLLOCK

Mailing Address 111 W 67TH ST.

City State Zip Code
NEW YORK NY 10023

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

Name of Employer Occupation
ELLIOTT MANAGEMENT CORP EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 19 / 2015

Transaction ID : SA11AI.815

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
JAMES RICKARDS

Mailing Address 18 GREAT ISLAND

City State Zip Code
DARIEN CT 06820

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

Name of Employer Occupation
WEST SHORE FUNDS INVESTMENT ADVISOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11AI.881

Amount of Each Receipt this Period
500.00

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

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

5900.00

**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 19 OF 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRIAN ROEHRKASSE

Mailing Address 1902 VERMONT AVE NW UNIT A

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

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

Name of Employer BAE SYSTEMS	Occupation COMMUNICATIONS OFFICER
---------------------------------	--------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11AI.822

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
BRIAN ROEHRKASSE

Mailing Address 1902 VERMONT AVE NW UNIT A

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

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

Name of Employer BAE SYSTEMS	Occupation COMMUNICATIONS OFFICER
---------------------------------	--------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : SA11AI.850

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
BRIAN ROEHRKASSE

Mailing Address 1902 VERMONT AVE NW UNIT A

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

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

Name of Employer BAE SYSTEMS	Occupation COMMUNICATIONS OFFICER
---------------------------------	--------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.884

Amount of Each Receipt this Period
250.00

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 20 OF 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MS. ELISE C. ROSS

Mailing Address 4916 COUNTRY CLUB DR N

City WILSON State NC Zip Code 27896

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2015

Transaction ID : SA11AI.769

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
ROBERT J SCHELLHAS

Mailing Address 2639 N ROOSEVELT STREET

City ARLINGTON State VA Zip Code 22207

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

Name of Employer ERNST & YOUNG LLP Occupation CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2015

Transaction ID : SA11AI.827

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
GORDON SINGER

Mailing Address 7 LANGFORD PLACE

City LONDON State Zip Code NW80L

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

Name of Employer ELLIOTT ADVISORS UK LTD Occupation MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2015

Transaction ID : SA11AI.779

Amount of Each Receipt this Period
 2700.00

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

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

4200.00

**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 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GORDON SINGER

Mailing Address **7 LANGFORD PLACE**

City **LONDON** State Zip Code **NW80L**

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

Name of Employer **ELLIOTT ADVISORS UK LTD** Occupation **MANAGER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 21 / 2015

Transaction ID : SA11AI.780

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
JENNY SINGER

Mailing Address **7 LANGFORD PLACE**

City **LONDON** State Zip Code **NW80L**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 21 / 2015

Transaction ID : SA11AI.781

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
JENNY SINGER

Mailing Address **7 LANGFORD PLACE**

City **LONDON** State Zip Code **NW80L**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 21 / 2015

Transaction ID : SA11AI.782

Amount of Each Receipt this Period
2700.00

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

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

8100.00

**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 22 OF 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER SMITH

Mailing Address 5004 NAHANT ST

City State Zip Code
BETHESDA MD 20816

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

Name of Employer Occupation
SUMMIT GLOBAL STRATEGIES CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 14 / 2015

Transaction ID : SA11AI.849

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DAVID SNEPP

Mailing Address 2531 64TH AVENUE S #307

City State Zip Code
ST. PETERSBURG FL 33712

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

Name of Employer Occupation
COUNTER NARRATIVES CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 01 / 2015

Transaction ID : SA11AI.825

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
DAVID SNEPP

Mailing Address 2531 64TH AVENUE S #307

City State Zip Code
ST. PETERSBURG FL 33712

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

Name of Employer Occupation
COUNTER NARRATIVES CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11AI.874

Amount of Each Receipt this Period
100.00

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

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

450.00

**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 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN W SNOW

Mailing Address 122 TEMPSFORD LANE

City Richmond State VA Zip Code 23226

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

Name of Employer JWS ASSOCIATES Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.880

Amount of Each Receipt this Period
 2700.00

B. Full Name (Last, First, Middle Initial)
MARK STALNECKER

Mailing Address 128 SKIMMER WAY

City Kitty Hawk State NC Zip Code 27949

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.871

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
MICHAEL H. STEINHARDT

Mailing Address 712 5TH AVE 34TH FL

City New York State NY Zip Code 10019

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

Name of Employer STEINHARDT MANAGEMENT Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11AI.775

Amount of Each Receipt this Period
 2700.00

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

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

5500.00

**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 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL H. STEINHARDT

Mailing Address 712 5TH AVE 34TH FL

City State Zip Code
NEW YORK NY 10019

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

Name of Employer Occupation
STEINHARDT MANAGEMENT OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11AI.776

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
WALTER P STERN

Mailing Address 630 FIFTH AVE.
36TH FLOOR

City State Zip Code
NEW YORK NY 10111

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

Name of Employer Occupation
CAPITAL GROUP INVESTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 15 / 2015

Transaction ID : SA11AI.777

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
STEVEN C STOMBRES

Mailing Address 10092 DANIELS RUN WAY

City State Zip Code
FAIRFAX VA 22030

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

Name of Employer Occupation
HARBINGER STRATEGIES PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 23 / 2015

Transaction ID : SA11AI.852

Amount of Each Receipt this Period
500.00

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

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

5900.00

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

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

FOR LINE NUMBER: PAGE 25 OF 47
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TAYLOR GRIFFIN FOR CONGRESS

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

Mailing Address 2405-F WEST NASH STREET

City WILSON State NC Zip Code 27896

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

Name of Employer STATE OF NORTH CAROLINA Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11AI.861

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
LOREN B THOMPSON

Mailing Address 807 LAWTON STREET

City MCLEAN State VA Zip Code 22101

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

Name of Employer LEXINGTON INSTITUTE Occupation CHIEF OPERATING OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : SA11AI.855

Amount of Each Receipt this Period
 500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

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

750.00

80950.00

**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 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. 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

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 10 / 2015

Transaction ID : SA11C.836

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
CHAMBLISS FOR SENATE

Mailing Address POST OFFICE BOX 12469

City ATLANTA State GA Zip Code 30355

FEC ID number of contributing federal political committee. **C** C00266932

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11C.863

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
EMERSON ELECTRIC CO. RESPONSIBLE GOVERNMENT FUND

Mailing Address 8000 W FLORISSANT AVE
STATION 2310

City ST. LOUIS State MO Zip Code 63136

FEC ID number of contributing federal political committee. **C** C00080515

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : SA11C.857

Amount of Each Receipt this Period
 5000.00

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

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

11000.00

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

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

FOR LINE NUMBER: PAGE 27 OF 47
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KPMG PARTNERS/PRINCIPALS AND EMPLOYEES PAC

Mailing Address 1801 K STREET, NW

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C00280222**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 30 2015

Transaction ID : SA11C.864

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MORPAC)

Mailing Address 1919 M STREET, NW
5TH FLOOR

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C C00004812**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 23 2015

Transaction ID : SA11C.856

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
REGIONS FINANCIAL CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1015 15TH STREET NW
SUITE 920

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C00432252**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 15 2015

Transaction ID : SA11C.774

Amount of Each Receipt this Period
500.00

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

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

5500.00

**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 47
	<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)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE

Mailing Address 701 PENNSYLVANIA AVENUE, NW
SUITE 750

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2015

Transaction ID : SA11C.788

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
THE GOLDMAN SACHS GROUP, INC. POLITICAL ACTION COMMITTEE

Mailing Address 101 CONSTITUTION AVENUE, NW
SUITE 1000 EAST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00350744

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11C.865

Amount of Each Receipt this Period
 2000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

7000.00

23500.00

**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 29 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TAYLOR GRIFFIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ADP

Mailing Address **56 MARIETTA STREET**

City **ATLANTA** State **GA** Zip Code **30303**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2015

Transaction ID : SA14.889

Amount of Each Receipt this Period
1306.76
 REFUND OF 10/27/2015 ADP EXPENSE

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).....

1306.76

1306.76

**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 30 OF 47			
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2015
Mailing Address 56 MARIETTA STREET		Amount of Each Disbursement this Period 517.41 Transaction ID : SB17.793
City ATLANTA State GA Zip Code 30303	Purpose of Disbursement PAYROLL TAXES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2015
Mailing Address 56 MARIETTA STREET		Amount of Each Disbursement this Period 99.39 Transaction ID : SB17.794
City ATLANTA State GA Zip Code 30303	Purpose of Disbursement PAYROLL FEES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2015
Mailing Address 56 MARIETTA STREET		Amount of Each Disbursement this Period 1306.76 Transaction ID : SB17.795
City ATLANTA State GA Zip Code 30303	Purpose of Disbursement SEE MEMO ENTRY 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1923.56
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 31 OF 47			
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JEFF HAUSER			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2015	
Mailing Address 310 VILLAGE GREEN DRIVE			Amount of Each Disbursement this Period 1306.76	
City TRENT WOODS	State NC	Zip Code 28562	Transaction ID : SB17.796	
Purpose of Disbursement SALARY		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) B. ADP			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015	
Mailing Address 56 MARIETTA STREET			Amount of Each Disbursement this Period 517.41	
City ATLANTA	State GA	Zip Code 30303	Transaction ID : SB17.797	
Purpose of Disbursement PAYROLL TAXES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) C. ADP			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015	
Mailing Address 56 MARIETTA STREET			Amount of Each Disbursement this Period 1306.76	
City ATLANTA	State GA	Zip Code 30303	Transaction ID : SB17.798	
Purpose of Disbursement SEE MEMO ENTRY		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	1824.17
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 32 OF 47			
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JEFF HAUSER			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015	
Mailing Address 310 VILLAGE GREEN DRIVE			Amount of Each Disbursement this Period 1306.76	
City TRENT WOODS	State NC	Zip Code 28562	Transaction ID : SB17.799	
Purpose of Disbursement SALARY		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ADP			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015	
Mailing Address 56 MARIETTA STREET			Amount of Each Disbursement this Period 1306.76	
City ATLANTA	State GA	Zip Code 30303	Transaction ID : SB17.887	
Purpose of Disbursement SEE MEMO ENTRY		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. JEFF HAUSER			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015	
Mailing Address 310 VILLAGE GREEN DRIVE			Amount of Each Disbursement this Period 1306.76	
City TRENT WOODS	State NC	Zip Code 28562	Transaction ID : SB17.888	
Purpose of Disbursement SALARY		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1306.76
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 33 OF 47			
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 56 MARIETTA STREET		Amount of Each Disbursement this Period 74.39
City ATLANTA State GA Zip Code 30303	Purpose of Disbursement PAYROLL FEES 001 Category/Type	
Candidate Name		Transaction ID : SB17.800
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 56 MARIETTA STREET		Amount of Each Disbursement this Period 1306.76
City ATLANTA State GA Zip Code 30303	Purpose of Disbursement SEE MEMO ENTRY 001 Category/Type	
Candidate Name		Transaction ID : SB17.801
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. JEFF HAUSER		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 310 VILLAGE GREEN DRIVE		Amount of Each Disbursement this Period 1306.76
City TRENT WOODS State NC Zip Code 28562	Purpose of Disbursement SALARY 001 Category/Type	
Candidate Name		Transaction ID : SB17.802 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1381.15
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 34 OF 47			
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015	
Mailing Address 56 MARIETTA STREET			Amount of Each Disbursement this Period 517.41	
City ATLANTA	State GA	Zip Code 30303	Transaction ID : SB17.803	
Purpose of Disbursement PAYROLL TAXES		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. ADP			Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015	
Mailing Address 56 MARIETTA STREET			Amount of Each Disbursement this Period 74.39	
City ATLANTA	State GA	Zip Code 30303	Transaction ID : SB17.896	
Purpose of Disbursement PAYROLL FEES		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. ADP			Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015	
Mailing Address 56 MARIETTA STREET			Amount of Each Disbursement this Period 517.41	
City ATLANTA	State GA	Zip Code 30303	Transaction ID : SB17.897	
Purpose of Disbursement PAYROLL TAXES		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	1109.21
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 35 OF 47		
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 56 MARIETTA STREET		Amount of Each Disbursement this Period 1306.76 Transaction ID : SB17.898
City ATLANTA State GA Zip Code 30303	Purpose of Disbursement SEE MEMO ENTRY 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. JEFF HAUSER		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 310 VILLAGE GREEN DRIVE		Amount of Each Disbursement this Period 1306.76 Transaction ID : SB17.899 [MEMO ITEM]
City TRENT WOODS State NC Zip Code 28562	Purpose of Disbursement SALARY 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 56 MARIETTA STREET		Amount of Each Disbursement this Period 74.39 Transaction ID : SB17.900
City ATLANTA State GA Zip Code 30303	Purpose of Disbursement PAYROLL FEES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1381.15
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 36 OF 47			
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015	
Mailing Address 56 MARIETTA STREET			Amount of Each Disbursement this Period 1306.76	
City ATLANTA	State GA	Zip Code 30303	Transaction ID : SB17.901	
Purpose of Disbursement SEE MEMO ENTRY		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. JEFF HAUSER			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015	
Mailing Address 310 VILLAGE GREEN DRIVE			Amount of Each Disbursement this Period 1306.76	
City TRENT WOODS	State NC	Zip Code 28562	Transaction ID : SB17.902	
Purpose of Disbursement SALARY		001 Category/ Type		
Candidate Name			[MEMO ITEM]	
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:				

Full Name (Last, First, Middle Initial) C. ADP			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015	
Mailing Address 56 MARIETTA STREET			Amount of Each Disbursement this Period 509.41	
City ATLANTA	State GA	Zip Code 30303	Transaction ID : SB17.903	
Purpose of Disbursement PAYROLL TAXES		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1816.17
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 37 OF 47		
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement
Mailing Address 56 MARIETTA STREET		M M / D D / Y Y Y Y 12 / 28 / 2015
City ATLANTA	State GA	Zip Code 30303
Purpose of Disbursement PAYROLL FEES	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 74.39	
		Transaction ID : SB17.904

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement
Mailing Address 56 MARIETTA STREET		M M / D D / Y Y Y Y 12 / 29 / 2015
City ATLANTA	State GA	Zip Code 30303
Purpose of Disbursement PAYROLL TAXES	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 507.41	
		Transaction ID : SB17.905

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement
Mailing Address 56 MARIETTA STREET		M M / D D / Y Y Y Y 12 / 29 / 2015
City ATLANTA	State GA	Zip Code 30303
Purpose of Disbursement SEE MEMO ENTRIES	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 1306.76	
		Transaction ID : SB17.906

SUBTOTAL of Disbursements This Page (optional).....	1888.56
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 38 OF 47			
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JEFF HAUSER			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2015		
Mailing Address 310 VILLAGE GREEN DRIVE			Amount of Each Disbursement this Period 1306.76		
City TRENT WOODS	State NC	Zip Code 28562	Transaction ID : SB17.907		
Purpose of Disbursement SALARY		Category/ Type 001	[MEMO ITEM]		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. ALPHAGRAPHS			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2015		
Mailing Address 301 ASHVILLE AVE SUITE 121			Amount of Each Disbursement this Period 178.57		
City CARY	State NC	Zip Code 27518	Transaction ID : SB17.830		
Purpose of Disbursement PRINTING		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015		
Mailing Address 5555 HILTON AVE STE 106			Amount of Each Disbursement this Period 1143.15		
City BATON ROUGE	State LA	Zip Code 70808	Transaction ID : SB17.890		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	1321.72
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 47			
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2015
Mailing Address 5555 HILTON AVE STE 106		Amount of Each Disbursement this Period 904.00 Transaction ID : SB17.804
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 5555 HILTON AVE STE 106		Amount of Each Disbursement this Period 429.95 Transaction ID : SB17.908
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CAMPAIGN GENERAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address PO BOX 2057		Amount of Each Disbursement this Period 368.45 Transaction ID : SB17.806
City BEAUFORT	State NC	
Zip Code 28516	Purpose of Disbursement CAMPAIGN EDUCATION	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	904.00
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 47	
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CREATIVE COLOR PRINTING		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 1605 RAILROAD STREET		Amount of Each Disbursement this Period 207.50 Transaction ID : SB17.807
City CORONA State CA Zip Code 92880	Purpose of Disbursement PRINTING Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CREATIVE COLOR PRINTING		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address 1605 RAILROAD STREET		Amount of Each Disbursement this Period 207.50 Transaction ID : SB17.909
City CORONA State CA Zip Code 92880	Purpose of Disbursement PRINTING Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CREATIVE COLOR PRINTING		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 1605 RAILROAD STREET		Amount of Each Disbursement this Period 132.50 Transaction ID : SB17.910
City CORONA State CA Zip Code 92880	Purpose of Disbursement PRINTING Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	547.50
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 47			
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELECTEK		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015
Mailing Address 4017 WASHINGTON ROAD STE 164		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.789
City CANNONSBURG State PA Zip Code 15317	Purpose of Disbursement DATABASE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. H2 CAPITAL CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 325 7TH STREET NW SUITE 400		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.840
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement FUNDRAISING CONSULTING 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. JEFF HAUSER		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 310 VILLAGE GREEN DRIVE		Amount of Each Disbursement this Period 1666.66 Transaction ID : SB17.685
City TRENT WOODS State NC Zip Code 28562	Purpose of Disbursement SALARY 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5866.66
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 47			
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JOHNNY'S HALF SHELL			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015		
Mailing Address 400 NORTH CAPITOL ST NW			Amount of Each Disbursement this Period 580.00		
City WASHINGTON	State DC	Zip Code 20001	Transaction ID : SB17.893		
Purpose of Disbursement EVENT CATERING		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B. NATIONBUILDER			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015		
Mailing Address 448 S HILL ST STE 200			Amount of Each Disbursement this Period 899.00		
City LOS ANGELES	State CA	Zip Code 90013	Transaction ID : SB17.912		
Purpose of Disbursement WEBSITE MAINTENANCE		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C. NATIONBUILDER			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015		
Mailing Address 448 S HILL ST STE 200			Amount of Each Disbursement this Period 899.00		
City LOS ANGELES	State CA	Zip Code 90013	Transaction ID : SB17.913		
Purpose of Disbursement WEBSITE MAINTENANCE		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....	2378.00
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 43 OF 47	
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NETBRANDS MEDIA CORPORATION			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015	
Mailing Address 14550 BEECHNUT ST			Amount of Each Disbursement this Period 235.00	
City HOUSTON	State TX	Zip Code 77083	Transaction ID : SB17.811	
Purpose of Disbursement PRINTING		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. NORTH CAROLINA BOARD OF ELECTIONS			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015	
Mailing Address PO BOX 27255			Amount of Each Disbursement this Period 1740.00	
City RALEIGHT	State NC	Zip Code 27611	Transaction ID : SB17.915	
Purpose of Disbursement FILING FEES		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ON MESSAGE INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015	
Mailing Address 815 SLATERS LN FIRST FLOOR			Amount of Each Disbursement this Period 15000.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB17.845	
Purpose of Disbursement POLLING		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	16975.00
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 44 OF 47			
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PIRYX INC			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015
Mailing Address 144 2ND ST 1ST FLOOR			Amount of Each Disbursement this Period 883.03 Transaction ID : SB17.812
City SAN FRANCISCO	State CA	Zip Code 94105	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. PIRYX INC			Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2015
Mailing Address 144 2ND ST 1ST FLOOR			Amount of Each Disbursement this Period 86.25 Transaction ID : SB17.894
City SAN FRANCISCO	State CA	Zip Code 94105	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. PIRYX INC			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 144 2ND ST 1ST FLOOR			Amount of Each Disbursement this Period 30.20 Transaction ID : SB17.914
City SAN FRANCISCO	State CA	Zip Code 94105	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	999.48
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 47	
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PROFESSIONAL DATA SERVICES		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 2470 DANIELS BRIDGE RD #121		Amount of Each Disbursement this Period 3069.59 Transaction ID : SB17.784
City ATHENS	State GA	
Zip Code 30606	Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PUSH DIGITAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 1202 MAIN ST SUITE C		Amount of Each Disbursement this Period 3113.70 Transaction ID : SB17.778
City COLUMBIA	State SC	
Zip Code 29201	Purpose of Disbursement MEDIA CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PUSH DIGITAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2015
Mailing Address 1202 MAIN ST SUITE C		Amount of Each Disbursement this Period 70.19 Transaction ID : SB17.831
City COLUMBIA	State SC	
Zip Code 29201	Purpose of Disbursement ADVERTISING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6253.48
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 47	
	<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)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ROSE STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 631 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 10845.00
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement FUNDRAISING CONSULTING Category/Type 001	
Candidate Name		Transaction ID : SB17.785
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:	

Full Name (Last, First, Middle Initial) B. TAYLOR GOURMET		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015
Mailing Address 1200 19TH ST NW		Amount of Each Disbursement this Period 209.05
City WASHINGTON State DC Zip Code 20036	Purpose of Disbursement MEETING EXPENSE Category/Type 001	
Candidate Name		Transaction ID : SB17.916
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:	

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

SUBTOTAL of Disbursements This Page (optional).....	11054.05
TOTAL This Period (last page this line number only).....	58930.62

**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 47			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
TAYLOR GRIFFIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BRENT ELLMERS			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015		
Mailing Address 122 KINGSWAY DRIVE			Amount of Each Disbursement this Period 500.00		
City DUNN	State NC	Zip Code 28334	Transaction ID : SB20A.866		
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

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

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

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00