



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**GARRET GRAVES 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))....	235795.28	1109737.43
(b) Total Contribution Refunds (from Line 20(d)) .....	500.00	1650.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	235295.28	1108087.43
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	340870.71	576911.88
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	340870.71	576911.88
8. Cash on Hand at Close of Reporting Period (from Line 27).....	531175.55	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

**GARRET GRAVES FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	209635.28	989690.06
(ii) Unitemized.....	8060.00	23287.75
(iii) TOTAL of contributions from individuals ▶	217695.28	1012977.81
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	18100.00	96759.62
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	235795.28	1109737.43
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	235795.28	1109737.43

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	340870.71	576911.88
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	1650.00
(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	1650.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	341370.71	578561.88

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	636750.98
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	235795.28
25. SUBTOTAL (add Line 23 and Line 24).....	872546.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	341370.71
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	531175.55

**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 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BEN A ADAMS**

Mailing Address **PO BOX 71**

City **BERWICK** State **LA** Zip Code **10342**

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

Name of Employer **DIAMOND TANK RENTALS** Occupation **OWNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 08 / 2014**

**Transaction ID : SA11AI.10659**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. BYRON A ADAMS JR**

Mailing Address **7526 ST. CHARLES AVENUE**

City **NEW ORLEANS** State **LA** Zip Code **70118**

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

Name of Employer **BT CAPITAL LLC** Occupation **INVESTMENTS**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : SA11AI.10588**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**SYED S AHMAD**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.88**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11365**

Amount of Each Receipt this Period  
**4.30**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

**750.00**

**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 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL F ALBERS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11366**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**KENNETH J ALCOTT**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11367**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**WALTER J ANDREWS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11368**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

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

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

0.00

**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 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DIONNE CHOUEST AUSTIN**

Mailing Address PO BOX 310

City State Zip Code  
GALLIANO LA 70354

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
EDISON CHOUEST OFFSHORE GENERAL COUNSEL

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11077**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**L. S AUSTIN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11369**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MS. JAYNE B BACOT**

Mailing Address 11813 LAKE ESTATES AVE

City State Zip Code  
BATON ROUGE LA 70810

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
LAKE SURGERY CENTER NURSE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 14 / 2014

**Transaction ID : SA11AI.10558**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. SAMUEL A BACOT**

Mailing Address 11813 LAKE ESTATES AVE

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
MCGLINCHEY STAFFORD ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : SA11AI.10560**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. PRINCETON M BARDWELL**

Mailing Address 519 HIDDEN LAKE COURT

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
BARDWELL HOMES REAL ESTATE DEVELOPMENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : SA11AI.10860**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**MRS. BARBARA P. BARNES**

Mailing Address 93 PALMETTO CT

City State Zip Code  
MANDEVILLE LA 70471

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11AI.10777**

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 9 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN BARTON JR.**

Mailing Address 452 CORNELL AVE.

City	State	Zip Code
BATON ROUGE	LA	70808

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

Name of Employer	Occupation
BREAZEALE, SACHSE & WILSON	ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.10976**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. W GEORGE BAYHI**

Mailing Address 330 GOVERNMENT ST

City	State	Zip Code
BATON ROUGE	LA	70802

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

Name of Employer	Occupation
SELF-EMPLOYED	ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : SA11AI.10889**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**JOHN J BEARDSWORTH JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City	State	Zip Code
RICHMOND	VA	23219-4074

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

Name of Employer	Occupation
HUNTON & WILLIAMS	ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11370**

Amount of Each Receipt this Period  
4.30

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RYAN A BECKER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11371**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**STEVEN H BECKER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11372**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**BEIRNE, MAYNARD & PARSONS, LLP**

Mailing Address 1300 POST OAK BOULEVARD  
SUITE 2500

City HOUSTON State TX Zip Code 77056

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11132**

Amount of Each Receipt this Period  
 PERMISSIBLE FUNDS: SEE MEMO ATTRIBUTION  
 500.00

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

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

500.00

**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 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MARTIN D. BEIRNE**

Mailing Address 1300 POST OAK BOULEVARD  
SUITE 2500

City HOUSTON State TX Zip Code 77056

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

Name of Employer BEIRNE, MAYNARD & PARSONS, LLP Occupation PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11132.0**

Amount of Each Receipt this Period  
500.00

BEIRNE, MAYNARD & PARSONS, LLP: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD G. BELL**

Mailing Address 1010 SECOND ST

City MORGAN CITY State LA Zip Code 70380

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

Name of Employer ED BELL & ASSOCIATES LLC Occupation ACCOUNTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11AI.10731**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MELINDA R BERES**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11373**

Amount of Each Receipt this Period  
4.30

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**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 12 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MARK B BIERBOWER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11374**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**JEFFRY M BLAIR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11375**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**BRETT BLANCHARD**

Mailing Address 8911 GAIL DRIVE

City Baton Rouge State LA Zip Code 70809

FEC ID number of contributing federal political committee.

Name of Employer EVANS-GRAVES ENGINEERS, INC. Occupation ENGINEER/SURVEYOR INTERN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.10817**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JERALD P BLOCK**

Mailing Address 502 E 1ST ST

City State Zip Code  
THIBODAUX LA 70301

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

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.10998**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MS. JACKIE BLOUNT**

Mailing Address 15021 TOWER COURT

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
STAR DEVELOPER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : SA11AI.10846**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT S BOH**

Mailing Address PO BOX 53266

City State Zip Code  
NEW ORLEANS LA 70153

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

Name of Employer Occupation  
BOH BROS. CONSTRUCTION EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11AI.10592**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

**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 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CHARLOTTE BOLLINGER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2014	
Mailing Address POST OFFICE BOX 250		<b>Transaction ID : SA11AI.10825</b>	
City LOCKPORT	State LA	Zip Code 70374	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			
Name of Employer BOLLINGER SHIPYARDS, INC.	Occupation EVP		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1750.00		

Full Name (Last, First, Middle Initial) <b>B. MATTHEW P BOSHER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11376</b>	
City RICHMOND	State VA	Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.30 HUNTON & WILLIAMS: PERMISSIBLE FUNDS <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 12.88		

Full Name (Last, First, Middle Initial) <b>C. JAMES W BOWEN</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11377</b>	
City RICHMOND	State VA	Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.30 HUNTON & WILLIAMS: PERMISSIBLE FUNDS <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 12.88		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1000.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES P BRADLEY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4.30

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11379**

Amount of Each Receipt this Period  
4.30  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**SHELDON T BRADSHAW**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11380**

Amount of Each Receipt this Period  
4.30  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**DAVID F BRANDLEY JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11381**

Amount of Each Receipt this Period  
4.30  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MR. EUGENE BRITTON</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 2215 S. EVERGREEN AVE		<b>Transaction ID : SA11A1.10764</b>	
City GONZALES	State LA	Zip Code 70737	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer MOSAIC FERTILIZER LLC	Occupation CHEMICAL ENGINEER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. BENJAMIN P BROWDER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11A1.11382</b>	
City RICHMOND	State VA	Zip Code 23219-4074	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4.30	
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 12.88		
		HUNTON & WILLIAMS: PERMISSIBLE FUNDS <b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C. ANTHONY T BROWN SR</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11A1.11383</b>	
City RICHMOND	State VA	Zip Code 23219-4074	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4.30	
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 12.88		
		HUNTON & WILLIAMS: PERMISSIBLE FUNDS <b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	500.00



**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 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TYLER P BROWN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11384**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**F W BROWNELL**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11385**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**BUIKEMA LAW GROUP LLC**

Mailing Address P.O. BOX 212

City HINSDALE State IL Zip Code 60522-0212

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11AI.10700**

Amount of Each Receipt this Period  
 PERMISSIBLE FUNDS: SEE MEMO ATTRIBUTION  
 250.00

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

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

250.00

**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 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PAUL R. BUIKEMA**

Mailing Address 509 RYAN CT

City WESTMONT State IL Zip Code 60559

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

Name of Employer BUIKEMA LAW GROUP LLC Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11AI.10700.0**

Amount of Each Receipt this Period  
250.00

BUIKEMA LAW GROUP LLC: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**KRISTY N BULLEIT**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11386**

Amount of Each Receipt this Period  
4.30

HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD H BULTHUIS**

Mailing Address 3648 QUINCE CT

City DOWNERS GROVE State IL Zip Code 60515-1429

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

Name of Employer REPUBLIC SERVICES Occupation MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11AI.10696**

Amount of Each Receipt this Period  
250.00

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

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

250.00

**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 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOSEPH B BUONANNO**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11387**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**NADIA S BURGARD**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4.30

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11389**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**KEN BURNS**

Mailing Address 6021 EAST MINERAL PLACE

City CENTENNIAL State CO Zip Code 80112

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

Name of Employer ATKINS Occupation SENIOR VP - BUSINESS DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2014

**Transaction ID : SA11AI.10579**

Amount of Each Receipt this Period  
 250.00

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

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

250.00

**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 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**M B BURNS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11390**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**PATRICK S BURTON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11391**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. RONALD CALLAIS**

Mailing Address PO BOX 596

City Golden Meadow State LA Zip Code 70357-0596

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

Name of Employer ALLIED SHIPYARD Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11023**

Amount of Each Receipt this Period  
 500.00

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 21 OF 240  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MATTHEW J CALVERT**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11392**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**DANIEL M CAMPBELL**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11393**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS H CANTRILL**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11394**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

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

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

0.00

**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 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLIE CAPLINGER**

Mailing Address 59525 NESLO ROAD

City State Zip Code  
SLIDELL LA 70460

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

Name of Employer Occupation  
HOWARD WEIL STOCK BROKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 16 / 2014

**Transaction ID : SA11AI.10813**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**CURTIS G CARLSON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11395**

Amount of Each Receipt this Period  
4.30

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**AMANDA CARR**

Mailing Address 18216 125TH AVE SW

City State Zip Code  
VASHON WA 98070

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

Name of Employer Occupation  
PLAUCHE & CARR LLP ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 05 / 2014

**Transaction ID : SA11AI.10527**

Amount of Each Receipt this Period  
1250.00

**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 23 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMANDA CARR**

Mailing Address 18216 125TH AVE SW

City VASHON State WA Zip Code 98070

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

Name of Employer PLAUCHE & CARR LLP Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1563.88**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 12 / 2014**

**Transaction ID : SA11AI.11146**

Amount of Each Receipt this Period  
**313.88**

IN-KIND: FOOD & BEVERAGES

**B.** Full Name (Last, First, Middle Initial)  
**JEAN G CARTER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.88**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11396**

Amount of Each Receipt this Period  
**4.30**

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**CHARLES D CASE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.88**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11397**

Amount of Each Receipt this Period  
**4.30**

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

**313.88**

**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 240
	<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	

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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR MICHAEL J CASTINE III**

Mailing Address 10215 BARRINGER FOREMAN RD

City State Zip Code  
BATON ROUGE LA 70809

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

Name of Employer Occupation  
SELF-EMPLOYED PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11010**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL A CAVELL**

Mailing Address 211 ABBY RD

City State Zip Code  
THIBODAUX LA 70301-6018

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

Name of Employer Occupation  
MORVANT & CAVELL ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11000**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**JOHN C CHENAULT V**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11398**

Amount of Each Receipt this Period  
4.30

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

800.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. M J CHERAMIE JR.**

Mailing Address 9396 HWY 1

City State Zip Code  
LOCKPORT LA 70374

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

Name of Employer Occupation  
L & M BOTRUC RENTALS PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : SA11AI.10568**

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
**DR CAMILE L CHIASSON**

Mailing Address 900 N CANAL BLVD

City State Zip Code  
THIBODAUX LA 70301

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

Name of Employer Occupation  
CHIASSON EYE CARE CENTER OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11105**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM CHILES**

Mailing Address 5545 TUPPER LAKE DRIVE

City State Zip Code  
HOUSTON TX 77056

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

Name of Employer Occupation  
BRISTOW GROUP INC. CEO EMERITUS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 22 / 2014

**Transaction ID : SA11AI.10836**

Amount of Each Receipt this Period  
500.00

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

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

1400.00

**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 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. CAROLYN CHOUEST**

Mailing Address **PO BOX 310**

City **GALLIANO** State **LA** Zip Code **70354**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11073**

Amount of Each Receipt this Period  
**2600.00**

**B.** Full Name (Last, First, Middle Initial)  
**GARY CHOUEST**

Mailing Address **PO BOX 310**

City **GALLIANO** State **LA** Zip Code **70354**

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

Name of Employer **EDISON CHOUEST OFFSHORE** Occupation **OWNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11005**

Amount of Each Receipt this Period  
**2600.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROSS M CHOUEST**

Mailing Address **PO BOX 310**

City **GALLIANO** State **LA** Zip Code **70354**

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

Name of Employer **EDISON CHOUEST OFFSHORE** Occupation **PRINCIPAL**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11063**

Amount of Each Receipt this Period  
**2600.00**

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

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

**7800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 240
	<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	

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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES N CHRISTMAN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11399**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**WHITTINGTON W CLEMENT**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11400**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**CASSANDRA C COLLINS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11401**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.30

**[MEMO ITEM]**

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

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

0.00

**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 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WILBERT J COLLINS**

Mailing Address 113 HARRY STREET

City State Zip Code  
GOLDEN MEADOW LA 70357

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11110**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. SCOTT H COOPER**

Mailing Address 118 N ROYAL ST  
SUITE 1100

City State Zip Code  
MOBILE AL 36602

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

Name of Employer Occupation  
CRESCENT TOWING PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : SA11AI.10910**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**STEPHEN CORY**

Mailing Address 144 SANCTUARY BOULEVARD

City State Zip Code  
MANDEVILLE LA 70471

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

Name of Employer Occupation  
CORY, TUCKER & LARROWE, INC. CONSTRUCTION BONDS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 09 / 2014

**Transaction ID : SA11AI.10723**

Amount of Each Receipt this Period  
500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DWAYNE COULON**

Mailing Address 4942 REBELLE LANE

City State Zip Code  
PORT ALLEN LA 70767

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

Name of Employer Occupation  
SELF FARMER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 23 / 2014

**Transaction ID : SA11AI.10897**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**CROSBY DEVELOPMENT, LLC.**

Mailing Address 1 SANCTUARY BLVD

City State Zip Code  
MANDEVILLE LA 70471

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2014

**Transaction ID : SA11AI.10799**

Amount of Each Receipt this Period  
500.00

LLC INFORMATION REQUESTED

**C.** Full Name (Last, First, Middle Initial)  
**DR. KENNETH J CRUSE**

Mailing Address 180 W LAKESHORE DR

City State Zip Code  
THIBODAUX LA 70301

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

Name of Employer Occupation  
SELF-EMPLOYED PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.10993**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ALEXANDRA B CUNNINGHAM**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11402**

Amount of Each Receipt this Period  
 4.30  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**FAUSTINO S. DALMAU**

Mailing Address 18331 W VILLAGE WAY

City BATON ROUGE State LA Zip Code 70810

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

Name of Employer CARDENAS TRADING CO. LTD. Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11014**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**SAMUEL A DANON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11403**

Amount of Each Receipt this Period  
 4.30  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

250.00

**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 31 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MR. BRETT DAVIS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014	
Mailing Address 24 PINTAIL TRACE		<b>Transaction ID : SA11AI.10891</b>	
City MANDEVILLE	State LA	Zip Code 70471	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer BDS CONSTRUCTION	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. DAVE DAVIS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 7811 PALM PARK LANE		<b>Transaction ID : SA11AI.11003</b>	
City BATON ROUGE	State LA	Zip Code 70809	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00		

Full Name (Last, First, Middle Initial) <b>C. NEDRA DAVIS KOREVEC</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2014	
Mailing Address 622 STEELE BLVD.		<b>Transaction ID : SA11AI.10725</b>	
City BATON ROUGE	State LA	Zip Code 70806	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer CHENIER PLAIN COASTAL PROTECTION & R	Occupation EXEC. DIRECTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. PETER T DAZZIO**

Mailing Address 4307 LAKE LAWRENCE CIR

City State Zip Code  
BATON ROUGE LA 70816

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

Name of Employer Occupation  
WATSON, BLANCHE, WILSON & POSNER LLP ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : SA11AI.10882**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**ALI DE JONGH WHITLEY**

Mailing Address 637 OAKLAND TERRACE

City State Zip Code  
ALEXANDRIA VA 22302

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.10961**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**JOHN J DELIONADO**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11404**

Amount of Each Receipt this Period  
4.30

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

550.00



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

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

FOR LINE NUMBER: PAGE 33 OF 240  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**STEPHEN P DEMM**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

Transaction ID : SA11AI.11405

Amount of Each Receipt this Period  
4.30

HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**JOSEPH DEVALL SR.**

Mailing Address 311 GULFWAY

City HACKBERRY State LA Zip Code 70645

FEC ID number of contributing federal political committee. C

Name of Employer DEVAL TOWING Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 07 / 2014

Transaction ID : SA11AI.10569

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MS. EDGARDO R DIAZ**

Mailing Address 103 ACADIA POINT DR

City THIBODAUX State LA Zip Code 70301-5069

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 23 / 2014

Transaction ID : SA11AI.10876

Amount of Each Receipt this Period  
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. EDGARDO R DIAZ**

Mailing Address 103 ACADIA POINT DR

City State Zip Code  
THIBODAUX LA 70301-5069

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11109**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**JOHN DIEZ**

Mailing Address 42126 HIGHWAY 931

City State Zip Code  
GONZALES LA 70737

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

Name of Employer Occupation  
VOLKERT INC MARKETING DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : SA11AI.10533**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. HENRY I DIFRANCO**

Mailing Address 113 SHERRY LN

City State Zip Code  
MANDEVILLE LA 70471

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

Name of Employer Occupation  
PRINCIPAL ENGINEERING, INC. CIVIL ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11AI.10635**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MARY GOODYEAR DOSSETT**

Mailing Address 538 NORTHWOODS DR

City State Zip Code  
ABITA SPRINGS LA 70420

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

Name of Employer Occupation  
MONEY HILL GOLF AND COUNTRY CLUB PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11A1.10797**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**EDWARD L DOUMA**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11A1.11406**

Amount of Each Receipt this Period  
4.30

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**GORDON E. DOVE**

Mailing Address PO BOX 629

City State Zip Code  
HOUMA LA 70361

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

Name of Employer Occupation  
LOUISIANA HOUSE OF REPRESENTATIVES STATE REPRESENTATIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11A1.10994**

Amount of Each Receipt this Period  
2500.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DR. WILLIAM A. COUVILLON, LLC**

Mailing Address 7341 JEFFERSON HWY.  
SUITE G

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2014

**Transaction ID : SA11Al.10803**

Amount of Each Receipt this Period  
1000.00

PERMISSIBLE FUNDS: SEE MEMO ATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DR. WILLIAM A. COUVILLION**

Mailing Address 7341 JEFFERSON HWY  
SUITE G

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
DR. WILLIAM A. COUVILLION LLC DENTIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2014

**Transaction ID : SA11Al.10803.0**

Amount of Each Receipt this Period  
1000.00

DR. WILLIAM A. COUVILLION, LLC: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**SEAN P DUCHARME**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11Al.11407**

Amount of Each Receipt this Period  
4.30

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**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 37 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MASHHOUR DUKUM**

Mailing Address 6916 N ALGONQUIN AVE

City State Zip Code  
CHICAGO IL 60646

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

Name of Employer Occupation  
ELSTON GROCERIES INC. EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11012**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**DEIDRE G DUNCAN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.88

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11408**

Amount of Each Receipt this Period  
4.30

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**SARA M DUNHAM**

Mailing Address 2603 EAST LAKESHORE DR

City State Zip Code  
BATON ROUGE LA 70808

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

Name of Employer Occupation  
SELF TECHNOLOGY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11089**

Amount of Each Receipt this Period  
750.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RON DUPLESSIS**

Mailing Address 863 DIRON CIRCLE

City State Zip Code  
BATON ROUGE LA 70810

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
DUPLESSIS AUTOMOTIVE EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.10904**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MR. WADE DUTY**

Mailing Address 22520 SUTTER LANE

City State Zip Code  
ZACHARY LA 70791

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
LCA EXECUTIVE DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.10901**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**FREDERICK R EAMES**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11409**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HEATHER A EASTEP**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11410

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**W J EDWARDS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11411

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. ANDREW L EHRlich**

Mailing Address 1007 KENNEDY ST

City Falls Church State VA Zip Code 22046

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

Name of Employer FAEGRE BAKER DANIELS LP Occupation PRINCIPAL

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11022

Amount of Each Receipt this Period  
 500.00

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

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

500.00

**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 40 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MR. GORDON D. ELLIS JR.</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 11410 SUGAR LANE		<b>Transaction ID : SA11AI.10772</b>	
City BATON ROUGE	State LA	Zip Code 70810	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			
Name of Employer ELLIS INSURANCE & FINANCIAL GROUP	Occupation INSURANCE AGENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. EDWARD W ELMORE JR</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11412</b>	
City RICHMOND	State VA	Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.29 HUNTON & WILLIAMS: PERMISSIBLE FUNDS <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 12.87	

Full Name (Last, First, Middle Initial) <b>C. FRANK E EMORY JR</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11413</b>	
City RICHMOND	State VA	Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.29 HUNTON & WILLIAMS: PERMISSIBLE FUNDS <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 12.87	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1000.00
<b>TOTAL</b> This Period (last page this line number only).....	_____



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 240
	<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	

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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN M ENGQUIST**

Mailing Address 7500 PECUE LANE

City State Zip Code  
BATON ROUGE LA 70809

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HEAD & ENGQUIST EQUIPMENT SERVICES EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11087**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**JUAN C ENJAMIO**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11414**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**PHILLIP J ESKENAZI**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11415**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KELLY L FAGLIONI**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11416**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**SUSAN S FAILLA**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11417**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES H. FAST**

Mailing Address PO BOX 6848

City METAIRIE State LA Zip Code 70009

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

Name of Employer FUGRO CONSULTANTS Occupation BUSINESS DEVELOPMENT DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11AI.10791**

Amount of Each Receipt this Period  
 500.00

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

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

500.00

**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 43 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DELPHINE BERNARD FAULK</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014	
Mailing Address 6811 JEFFERSON HWY		<b>Transaction ID : SA11AI.10884</b>	
City BATON ROUGE	State LA	Zip Code 70806-8108	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. MS. CHARLENE M FAVRE</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2014	
Mailing Address 5225 WOODLAKE DRIVE		<b>Transaction ID : SA11AI.10614</b>	
City BATON ROUGE	State LA	Zip Code 70817	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>C. MS. MONICA J FAZIO</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2014	
Mailing Address 1151 S CLOVERDALE AVENUE		<b>Transaction ID : SA11AI.10621</b>	
City BATON ROUGE	State LA	Zip Code 70808	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ERIC H FEILER**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11418**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MS. CHERYL D FELDER**

Mailing Address **235 BROADWAY ST**

City **NEW ORLEANS** State **LA** Zip Code **70118**

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

Name of Employer **CHANNEL SHIPYARD** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 14 / 2014**

**Transaction ID : SA11AI.10556**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**KEVIN C FELZ**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11419**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

**500.00**

**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 45 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EDWARD F FERNANDES**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4.29

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11421

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
**NORMAN W FICHTHORN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11422

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
**ANDREA B FIELD**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11423

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

[MEMO ITEM]

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

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

0.00

**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 46 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KEVIN J FINTO**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11424**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MELANIE FITZGERALD**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11425**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL F FITZPATRICK**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11426**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

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

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

0.00

**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 47 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD FLICK**

Mailing Address 1943 N CAUSEWAY BLVD

City State Zip Code  
MANDEVILLE LA 70471

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

Name of Employer Occupation  
BANNER FORD AUTO DEALER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 11 / 2014

**Transaction ID : SA11AI.10729**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**JANE WINFREE FLOWERS**

Mailing Address 10114 N MAGNA CARTA PL

City State Zip Code  
BATON ROUGE LA 70815

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

Name of Employer Occupation  
SELF ARTIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11103**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT N FLOWERS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11427**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM M FLYNN**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11428**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MR. RON FORMAN**

Mailing Address **1806 PALMER AVENUE**

City **NEW ORLEANS** State **LA** Zip Code **70118**

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

Name of Employer **AUDOBON INSTITUTE** Occupation **PRESIDENT & CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : SA11AI.10597**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**STEPHANIE TRAPP FRANCIS**

Mailing Address **750 MARQUETTE DR**

City **BATON ROUGE** State **LA** Zip Code **70806**

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

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11027**

Amount of Each Receipt this Period  
**250.00**

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

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

**750.00**



**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 49 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LAUREN E FREEMAN**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11429**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

Mailing Address **1417 RICHLAND AVE**

City **BATON ROUGE** State **LA** Zip Code **70808**

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

Name of Employer **OUR LADY OF THE LAKE** Occupation **PHYSICIAN**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 23 / 2014**

**Transaction ID : SA11AI.10911**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**CHARLES A GALL**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11430**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**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 50 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD D GARY**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11431**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MS. KATHY GAUBERT**

Mailing Address **330 COUNTRY CLUB BLVD**

City **THIBODAUX** State **LA** Zip Code **70301**

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

Name of Employer **DOUBLE G MARINE** Occupation **MEMBER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.10989**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN F GAY**

Mailing Address **57505 HYNES DRIVE**

City **PLAQUEMINE** State **LA** Zip Code **70764**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11140**

Amount of Each Receipt this Period  
**250.00**

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KEVIN M GEORGERIAN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11432

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
**JOHN T GERHART JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11433

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
**ANDREW G GEYER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11434

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 52 OF 240  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MICHELLE GIARDINA**

Mailing Address **243 RUE PELLETIER**

City **THIBODAUX** State **LA** Zip Code **70301**

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

Name of Employer **QUALITY SITEWORK MATERIALS** Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11118**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**JEFFREY W GIESE**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **12.87**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11435**

Amount of Each Receipt this Period  
**4.29**

**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**[MEMO ITEM]**

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

Mailing Address **RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **12.87**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11436**

Amount of Each Receipt this Period  
**4.29**

**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**[MEMO ITEM]**

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

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

**500.00**

**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 53 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>DOUGLAS S GRANGER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11437</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period HUNTON & WILLIAMS: PERMISSIBLE FUNDS 4.29		
FEC ID number of contributing federal political committee. C	[MEMO ITEM]		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date 12.87		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>LAURIE A GRASSO</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11438</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period HUNTON & WILLIAMS: PERMISSIBLE FUNDS 4.29		
FEC ID number of contributing federal political committee. C	[MEMO ITEM]		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date 12.87		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>MS. ALLISON L GRAVES</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 2311 CONNECTICUT AVE NW		<b>Transaction ID : SA11AI.11134</b>	
City WASHINGTON State DC Zip Code 20008	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	[MEMO ITEM]		
Name of Employer ENTERGY Occupation DIRECTOR, FEDERAL ENERGY POLICY	Election Cycle-to-Date 250.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	250.00

**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 54 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ALYSIA P GRAVES**

Mailing Address 14555 MEMORIAL TOWER DRIVE

City	State	Zip Code
BATON ROUGE	LA	70810

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

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11AI.10634**

Amount of Each Receipt this Period  
 250.00

SEE REATTRIBUTION BELOW

**B.** Full Name (Last, First, Middle Initial)  
**ALYSIA P GRAVES**

Mailing Address 14555 MEMORIAL TOWER DRIVE

City	State	Zip Code
BATON ROUGE	LA	70810

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

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11AI.10634.0**

Amount of Each Receipt this Period  
 -50.00

SEE REATTRIBUTION BELOW

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**KURT GRAVES**

Mailing Address 14555 MEMORIAL TOWER DRIVE

City	State	Zip Code
BATON ROUGE	LA	70810

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

Name of Employer	Occupation
BATON ROUGE CLINIC	M.D.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11AI.10634.1**

Amount of Each Receipt this Period  
 50.00

REATTRIBUTED

**[MEMO ITEM]**

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

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

250.00

**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 55 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KURT GRAVES**

Mailing Address 14555 MEMORIAL TOWER DRIVE

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
BATON ROUGE CLINIC M.D.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11AI.10633**

Amount of Each Receipt this Period  
600.00

IN-KIND: POSTAGE

**B.** Full Name (Last, First, Middle Initial)  
**J W GRAY JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11439**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**CHARLES E GREEF**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11440**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

600.00

**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 56 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JONATHAN GREER**

Mailing Address 6926 WOODSTOCK DR

City State Zip Code  
BATON ROUGE LA 70809-1005

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

Name of Employer Occupation  
SELF FINANCIAL CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.10970**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN A GREZAFFI**

Mailing Address 14330 LA HWY 417

City State Zip Code  
BATCHELOR LA 70715

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

Name of Employer Occupation  
BUCKHORN STOCK FARM FARMER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 23 / 2014

**Transaction ID : SA11AI.10899**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**GRETA T GRIFFITH**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11441**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**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 57 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. BOBBI GRIGSBY**

Mailing Address 19145 W MUIRFIELD CIRCLE

City State Zip Code  
BATON ROUGE LA 70810-5996

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : SA11AI.10918**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. L LANE GRIGSBY**

Mailing Address PO BOX 104

City State Zip Code  
BATON ROUGE LA 70821

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

Name of Employer Occupation  
CAJUN INDUSTRIES LLC CHAIRMAN OF THE BOARD

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : SA11AI.10920**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. CHRISTOPHER A GUIDRY**

Mailing Address PO BOX 2506

City State Zip Code  
RESERVE LA 70084

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

Name of Employer Occupation  
GUIDRY ASSOCIATES LLC MANAGING PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1627.98

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : SA11AI.10552**

Amount of Each Receipt this Period  
250.00

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

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

5450.00

**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 58 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JERENE GUIDRY**

Mailing Address 5396 COURTYARD DRIVE

City State Zip Code  
GONZALES LA 70737

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

Name of Employer Occupation  
GUIDRY ASSOCIATES PRINCIPAL & MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2014

**Transaction ID : SA11AI.10926**

Amount of Each Receipt this Period  
300.00

IN-KIND: EVENT SPONSORSHIP FEES

**B.** Full Name (Last, First, Middle Initial)  
**JERENE GUIDRY**

Mailing Address 5396 COURTYARD DRIVE

City State Zip Code  
GONZALES LA 70737

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

Name of Employer Occupation  
GUIDRY ASSOCIATES PRINCIPAL & MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
830.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2014

**Transaction ID : SA11AI.10924**

Amount of Each Receipt this Period  
380.00

IN-KIND: EVENT SPONSORSHIP FEES

**C.** Full Name (Last, First, Middle Initial)  
**STEVEN M HAAS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11442**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

680.00

**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 59 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BRIAN L HAGER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11443

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

[MEMO ITEM]

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

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11444

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
**JARRETT L HALE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11445

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

[MEMO ITEM]

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

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

0.00

**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 60 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GREGORY HAMER**

Mailing Address 805 PINE

City State Zip Code  
MORGAN CITY LA 70380

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
B&G FOOD ENTERPRISES, LLC CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11A1.10643**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**LESLIE S HANSEN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11A1.11447**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**RONALD M HANSON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11A1.11448**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JASON W HARBOUR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11Al.11449**

Amount of Each Receipt this Period  
 4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**FRAN HARVEY**

Mailing Address 2935 KLEINERT AVE

City Baton Rouge State LA Zip Code 70806

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

Name of Employer GLOBAL GEOSPATIAL SOLUTIONS Occupation SENIOR GIS ANALYST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11Al.10787**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**JEFFREY L HARVEY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11Al.11450**

Amount of Each Receipt this Period  
 4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

250.00

**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 62 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RUDENE T HAYNES**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11Al.11451**

Amount of Each Receipt this Period  
**4.29**  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**RYAN K. HAYNIE**

Mailing Address **P.O. BOX 44032**

City **BATON ROUGE** State **LA** Zip Code **70804**

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

Name of Employer **HAYNIE & ASSOCIATES** Occupation **OWNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 16 / 2014**

**Transaction ID : SA11Al.10628**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL B HEARD**

Mailing Address **19050 PERKINS ROAD E**

City **BATON ROUGE** State **LA** Zip Code **70817**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : SA11Al.10632**

Amount of Each Receipt this Period  
**5000.00**  
**SEE REDESIGNATION BELOW**

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

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

**6000.00**

**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 63 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL B HEARD**

Mailing Address 19050 PERKINS ROAD E

City State Zip Code  
BATON ROUGE LA 70817

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 22 / 2014

**Transaction ID : SA11AI.11610**

Amount of Each Receipt this Period  
-2400.00

SEE REDESIGNATION BELOW

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL B HEARD**

Mailing Address 19050 PERKINS ROAD E

City State Zip Code  
BATON ROUGE LA 70817

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 22 / 2014

**Transaction ID : SA11AI.11611**

Amount of Each Receipt this Period  
2400.00

REDESIGNATED

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MS. CHARYL B HEARIN**

Mailing Address 4024 CHATFIELD AVENUE

City State Zip Code  
BATON ROUGE LA 70808

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

Name of Employer Occupation  
HEARIN HOLDINGS MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 22 / 2014

**Transaction ID : SA11AI.10627**

Amount of Each Receipt this Period  
250.00

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

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

250.00

**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 64 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MARK S HEDBERG**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11452**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MR. E. SCOTT HENRY**

Mailing Address 814 SAINT ANTHONY ST

City LAKE CHARLES State LA Zip Code 70601

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

Name of Employer SELF Occupation HUNTING GUIDE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11AI.10737**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**GREGORY G HESSE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11453**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**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 65 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID A HIGBEE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11454**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MR. JERRY P HIMMEL**

Mailing Address 19840 SOUTHERN HILLS AVENUE

City BATON ROUGE State LA Zip Code 70809

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

Name of Employer HIMMEL'S HARDWARE Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11AI.10599**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS Y HINER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11455**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**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 66 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM E HINSLEY III**

Mailing Address 3620 47TH AVE SW

City State Zip Code  
SEATTLE WA 98116

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
LIFE INC. PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.10547**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**D B HOFFMAN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11456**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT E HOGFOSS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11457**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS L. HOLLIDAY**

Mailing Address 1903 LONGVIEW DR

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
FRANKLIN PRINTING PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2014

**Transaction ID : SA11AI.10779**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**HENRY ANDREW HOLLIER**

Mailing Address 7909 OLD HAMMOND HIGHWAY

City State Zip Code  
BATON ROUGE LA 70809

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

Name of Employer Occupation  
BATON ROUGE UROLOGY GROUP PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 21 / 2014

**Transaction ID : SA11AI.10580**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**JOHN R HOLZGRAEFE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11458**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

750.00

**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 68 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GEORGE C HOWELL III**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11Al.11459**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**A. WHITFIELD HUGULEY**

Mailing Address **12 RICHMOND PLACE**

City **NEW ORLEANS** State **LA** Zip Code **70115**

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

Name of Employer **ED&F MAN LIQUID PRODUCTS** Occupation **MANAGER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 29 / 2014**

**Transaction ID : SA11Al.10653**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. PETER H HUIZENGA JR**

Mailing Address **630 S OAK**

City **HINSDALE** State **IL** Zip Code **60521**

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

Name of Employer **HUIZENGA CAPITAL MANAGEMENT** Occupation **PRINCIPAL**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 08 / 2014**

**Transaction ID : SA11Al.10684**

Amount of Each Receipt this Period  
**250.00**

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

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

**2750.00**

**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 69 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MR. PETER H HUIZENGA SR.</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address 2251 YORK ROAD SUITE 500		<b>Transaction ID : SA11AI.10690</b>	
City OAK BROOK State IL Zip Code 60523	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation HUIZENGA CAPITAL MANAGEMENT CHAIRMAN		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. KEVIN F HULL</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11460</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period 4.29		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation HUNTON & WILLIAMS ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 12.87		
		HUNTON & WILLIAMS: PERMISSIBLE FUNDS <b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C. CHRIS HUMPHREYS</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2014	
Mailing Address 19 BELLE GROVE DR		<b>Transaction ID : SA11AI.10610</b>	
City DESTREHAN State LA Zip Code 70047	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation PSI, INC. VP		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 70 OF 240
	<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	

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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HUNTON & WILLIAMS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11130**

Amount of Each Receipt this Period  
1000.00

PERMISSIBLE FUNDS: SEE MEMO ATTRIBUTIONS

**B.** Full Name (Last, First, Middle Initial)  
**DONALD P IRWIN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11461**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**JAMIE Z ISANI**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11462**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**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 71 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JUDITH H ITKIN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11463**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**LORI E JARVIS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4.29

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11465**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**JEFFREY S JENKINS**

Mailing Address 7102 MONITEAU COURT

City BATON ROUGE State LA Zip Code 70809

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

Name of Employer BERNHARD CAPITAL PARTNERS Occupation PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11AI.10666**

Amount of Each Receipt this Period  
 1500.00

**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 72 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MATTHEW D JENKINS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11466**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**HARRY M JOHNSON III**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11467**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**KAROLYN E JOHNSON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11468**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

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

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

0.00



**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 73 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES A JONES III**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11469**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**JOHN J JONES JR**

Mailing Address 116 AUDUBON

City THIBODAUX State LA Zip Code 70301

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

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11057**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**KEVIN W JONES**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11470**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

500.00

**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 74 OF 240
	<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	

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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LAURA E JONES**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11Al.11471**

Amount of Each Receipt this Period  
 4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MR. STEVE JORDAN**

Mailing Address PO BOX 1863

City LAKE CHARLES State LA Zip Code 70602

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

Name of Employer CENTRAL CRUDE Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11Al.10751**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**DAN J JORDANGER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11Al.11472**

Amount of Each Receipt this Period  
 4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**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 75 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ROLAND M JUAREZ**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11473**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**4.29**

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS R JULIN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11474**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**4.29**

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**KANNER & WHITLEY, LLC**

Mailing Address 701 CAMP STREET

City NEW ORLEANS State LA Zip Code 70130

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11AI.10665**

Amount of Each Receipt this Period  
 REFUNDED ON 9/15/2014  
**500.00**

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

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

**500.00**

**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 76 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ALLAN KANNER**

Mailing Address 1550 DUFOSSAT ST

City State Zip Code  
NEW ORLEANS LA 70115

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

Name of Employer Occupation  
KANNER & WHITLEY, LLC ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 23 / 2014

**Transaction ID : SA11AI.10893**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**KAY BARNETT CONSULTING LLC**

Mailing Address 4105 MAIDSTONE DR

City State Zip Code  
LAKE CHARLES LA 70605

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

Name of Employer Occupation  
KAY BARNETT CONSULTING LLC CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2014

**Transaction ID : SA11AI.11172**

Amount of Each Receipt this Period  
250.00

PERMISSIBLE FUNDS: SEE MEMO ATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KAY BARNETT**

Mailing Address 4105 MAIDSTONE DR

City State Zip Code  
LAKE CHARLES LA 70605

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

Name of Employer Occupation  
KAY BARNETT CONSULTING LLC CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2014

**Transaction ID : SA11AI.11172.0**

Amount of Each Receipt this Period  
250.00

KAY BARNETT CONSULTING LLC: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

750.00

**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 77 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM J KEARNEY IV**

Mailing Address 5934 CHESTNUT STREET

City State Zip Code  
NEW ORLEANS LA 70115

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
YENRAEK & ASSOCIATES EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.10590**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL G KEELEY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11475**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**G. R KEHOE II**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11476**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DOUGLAS W KENYON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11477

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL C KERRIGAN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11478

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
**RYAN T KETCHUM**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11479

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 79 OF 240  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MARILYN B KILGEN**

Mailing Address 1237 BURMA ROAD

City State Zip Code  
THIBODAUX LA 70301

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**800.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 30 2014**

**Transaction ID : SA11AI.10987**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**SCOTT H KIMPEL**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 30 2014**

**Transaction ID : SA11AI.11480**

Amount of Each Receipt this Period  
**4.29**

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT CAREY KING II**

Mailing Address 816 IDLEWILD LN

City State Zip Code  
LAKE CHARLES LA 70605

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

Name of Employer Occupation  
PIT GRILL INC. DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 15 2014**

**Transaction ID : SA11AI.10743**

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 80 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. HENRY W KINNEY III**

Mailing Address 1250 POYDRAS ST. STE 2450

City NEW ORLEANS	State LA	Zip Code 70113
---------------------	-------------	-------------------

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

Name of Employer KINNEY, ELLINGHAUSEN, RICHARD, & DESH	Occupation ATTORNEY
---	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11AI.10623**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. KRISTOPHER S KIRKPATRICK**

Mailing Address 4318 BROUSSARD ST

City BATON ROUGE	State LA	Zip Code 70808
---------------------	-------------	-------------------

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

Name of Employer ROEDEL PARSONS	Occupation ATTORNEY
------------------------------------	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1462.32

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11AI.10595**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**BASTIAN KNOPPERS**

Mailing Address 53 BAYBROOK LANE

City OAK BROOK	State IL	Zip Code 60523
-------------------	-------------	-------------------

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

Name of Employer FIS	Occupation SVP
-------------------------	-------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 27 / 2014

**Transaction ID : SA11AI.10645**

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 81 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. EDWARD B KOEHLER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11481</b>
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period HUNTON & WILLIAMS: PERMISSIBLE FUNDS 4.29	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation HUNTON & WILLIAMS ATTORNEY	<b>[MEMO ITEM]</b>
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 12.87	

Full Name (Last, First, Middle Initial) <b>B. JOHN T KONTER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11482</b>
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period HUNTON & WILLIAMS: PERMISSIBLE FUNDS 4.29	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation HUNTON & WILLIAMS ATTORNEY	<b>[MEMO ITEM]</b>
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 12.87	

Full Name (Last, First, Middle Initial) <b>C. CHRISTOPHER G KULP</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11483</b>
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period HUNTON & WILLIAMS: PERMISSIBLE FUNDS 4.29	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation HUNTON & WILLIAMS ATTORNEY	<b>[MEMO ITEM]</b>
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 12.87	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM H KURTZ**

Mailing Address 1516 AUDUBON STREET

City State Zip Code  
NEW ORLEANS LA 70118

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

Name of Employer Occupation  
AUDUBON NATURE INSTITUTE SR. VP & CHIEF OF STAFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11AI.10586**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD C. LAMBERT**

Mailing Address 900 WEST CAUSEWAY APPROACH

City State Zip Code  
MANDEVILLE LA 70471

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

Name of Employer Occupation  
RICHARD C. LAMBERT CONSULTANTS CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11AI.10794**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**ADRIAN P. LANDRY**

Mailing Address 14546 MEMORIAL TOWER DRIVE

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
BATON ROUGE CLINIC PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : SA11AI.10822**

Amount of Each Receipt this Period  
1000.00

**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: PAGE 83 OF 240  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     11e 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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ANDREW W LAWRENCE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

Transaction ID : SA11AI.11484

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**JACK E LAWTON JR**

Mailing Address 1450 WILLIAM ST  
LAWTON BUILDING, 2ND FLOOR

City Lake Charles State LA Zip Code 70601

FEC ID number of contributing federal political committee. C

Name of Employer JACK LAWTON LLC Occupation PRESIDENT & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

Transaction ID : SA11AI.11081

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. MITCHELL J LEBAS**

Mailing Address 627 PASTUREVIEW DRIVE

City Baton Rouge State LA Zip Code 70810

FEC ID number of contributing federal political committee. C

Name of Employer BACKFLOW PREVENTION SERVICES Occupation INSTRUCTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 22 / 2014

Transaction ID : SA11AI.10584

Amount of Each Receipt this Period  
500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DANIEL M LEBEY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11485

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**BRADLEY T LENNIE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

Transaction ID : SA11AI.11486

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT LEVIS**

Mailing Address 41 TURTLEBACK GLADE

City SLIDELL State LA Zip Code 70461

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

Name of Employer ROBERT LEVIS CHEVROLET Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2014

Transaction ID : SA11AI.10749

Amount of Each Receipt this Period  
 1000.00

**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 85 OF 240
	<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	

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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MORGAN LEVY**

Mailing Address 3061 LAUREL PLANTATION AVE

City State Zip Code  
BATON ROUGE LA 70820

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

Name of Employer Occupation  
GUGLIELMO, MARKS, SCHUTTE, TERHOEVE ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : SA11AI.10950**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**CATHERINE D LITTLE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11487**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**J ERIC LOCKRIDGE**

Mailing Address 2841 TWELVE OAKS AVE

City State Zip Code  
BATON ROUGE LA 70820

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

Name of Employer Occupation  
KEAN MILLER ATTORNEYS AT LAW PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11114**

Amount of Each Receipt this Period  
250.00

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

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

350.00

**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 86 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NASH E LONG III**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11488**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**DAVID S LOWMAN JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11489**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**TYLER MADDRY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11490**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

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

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

0.00

**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 87 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ANDREW MAHLER**

Mailing Address 7020 HIGH GROVE BLVD.

City State Zip Code  
BURR RIDGE IL 60527

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
THE MX GROUP MARKETING

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.10649**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MANUEL E MAISOG**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11491**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**NEIL J MAKI**

Mailing Address 525 SAINT MARY ST

City State Zip Code  
THIBODAUX LA 70301

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
THIBODAUX REGIONAL MED CENTER ORTHOPAEDIC SURGEON

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11120**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RORI H MALECH**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11492**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**DOUGLAS M MANCINO**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11493**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**CHRISTOPHER MANGIN JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11494**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

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

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

0.00



**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 89 OF 240
	<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	

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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ALAN J MARCUIS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11495**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**FERNANDO MARGARIT**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11496**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**LAURA C MARSHALL**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11497**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

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

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

0.00

**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 90 OF 240
	<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	

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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JEFFREY N MARTIN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11498**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**JOHN S MARTIN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11499**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. MANUEL I MARTINEZ**

Mailing Address 7280 CORPORATE BLVD

City BATON ROUGE State LA Zip Code 70809

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

Name of Employer MARTINEZ CUSTOM CLOTHIERS Occupation CUSTOM TAILOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : SA11AI.10914**

Amount of Each Receipt this Period  
 1000.00

**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 91 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WALFRIDO J MARTINEZ**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11500**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**J. MICHAEL MARTINEZ DE ANDINO**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11501**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**CAMPO ELIAS MATENS**

Mailing Address 4554 EMORY AVE

City BATON ROUGE State LA Zip Code 70808-4620

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

Name of Employer CYPRESS MANAGEMENT SERVICES, L.L.C. Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : SA11AI.10902**

Amount of Each Receipt this Period  
 500.00

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

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

500.00

**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 92 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LAURIE U MATHEWS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11502**

Amount of Each Receipt this Period  
 4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MARTIN MAYER**

Mailing Address 80 SPANISH MOSS CT.

City MANDEVILLE State LA Zip Code 70471

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

Name of Employer STIRLING PROPERTIES Occupation PRESIDENT & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 02 / 2014

**Transaction ID : SA11AI.10655**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**MS. MARY JO MAYFIELD**

Mailing Address 7575 JEFFERSON HWY 82

City BATON ROUGE State LA Zip Code 70806-8308

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : SA11AI.10852**

Amount of Each Receipt this Period  
 250.00

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

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

750.00

**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 93 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM H MCBRIDE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11503**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MS. JUDY Q MCCALL**

Mailing Address 8622 NORFOLK DRIVE

City BATON ROUGE State LA Zip Code 70809

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11AI.10601**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL C MCCANN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11504**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

500.00

**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 94 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>ALEXANDER G MCGEOCH</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11505</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period HUNTON & WILLIAMS: PERMISSIBLE FUNDS 4.29		
FEC ID number of contributing federal political committee. C	[MEMO ITEM]		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date 12.87		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>JOHN C MCGRANAHAN JR</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11506</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period HUNTON & WILLIAMS: PERMISSIBLE FUNDS 4.29		
FEC ID number of contributing federal political committee. C	[MEMO ITEM]		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date 12.87		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>KELLY J MCHUGH</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 845 GALVEZ ST		<b>Transaction ID : SA11AI.10755</b>	
City MANDEVILLE State LA Zip Code 70448	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	[MEMO ITEM]		
Name of Employer KELLY MCHUGH & ASSOCIATES Occupation ENGINEER	Election Cycle-to-Date 500.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	500.00

**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 95 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. MARY K MCKEE**

Mailing Address 2962 SVENDSON DR

City State Zip Code  
BATON ROUGE LA 70809

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11059**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. ANDREW T MCMAINS**

Mailing Address 2932 REMOND AVE

City State Zip Code  
BATON ROUGE LA 70808

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

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : SA11AI.10922**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**III FRANCIS MCMAINS**

Mailing Address 2525 PALM HILLS BLVD

City State Zip Code  
BATON ROUGE LA 70809

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

Name of Employer Occupation  
SELF EMPLOYED PHOTOGRAPHER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : SA11AI.10349**

Amount of Each Receipt this Period  
1000.00

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

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

2250.00

**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 96 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MS. CHRISTINA H MELTON</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2014	
Mailing Address 6384 ESPLANADE AVENUE		<b>Transaction ID : SA11AI.10612</b>	
City BATON ROUGE	State LA	Zip Code 70806	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer SELF	Occupation FILMMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) <b>B. GUSTAVO J MEMBIELA</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11507</b>	
City RICHMOND	State VA	Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.29 HUNTON & WILLIAMS: PERMISSIBLE FUNDS <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee.		C	
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 12.87		

Full Name (Last, First, Middle Initial) <b>C. URIEL A MENDIETA</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11508</b>	
City RICHMOND	State VA	Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.29 HUNTON & WILLIAMS: PERMISSIBLE FUNDS <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee.		C	
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 12.87		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 250.00
<b>TOTAL</b> This Period (last page this line number only).....	_____



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

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

FOR LINE NUMBER: PAGE 97 OF 240  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MARK W MENEZES**

Mailing Address 4630 HOLBORN AVENUE

City ANNANDALE State VA Zip Code 22003

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

Name of Employer HUNTON & WILLIAMS Occupation PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1012.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11509**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**GARY C MESSPLAY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11510**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**PETER J MIGNONE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11511**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

0.00

**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 98 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. R. KING MILLING</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2014	
Mailing Address 1625 PALMER AVE		<b>Transaction ID : SA11AI.10574</b>	
City NEW ORLEANS	State LA	Zip Code 70118	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00		

Full Name (Last, First, Middle Initial) <b>B. PATRICK E MITCHELL</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11512</b>	
City RICHMOND	State VA	Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.29 HUNTON & WILLIAMS: PERMISSIBLE FUNDS <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee.		C	
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 12.87		

Full Name (Last, First, Middle Initial) <b>C. MR. JARED MONCEAUX</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 13082 EAGLES WAY COURT		<b>Transaction ID : SA11AI.10762</b>	
City GEISMAR	State LA	Zip Code 70734	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer HARTMAN ENGINEERING	Occupation ENGINEER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1500.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 240
	<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	

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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**T J MOORE III**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
09 / 30 / 2014

**Transaction ID : SA11AI.11513**

Amount of Each Receipt this Period  
4.29  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**THURSTON R MOORE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
09 / 30 / 2014

**Transaction ID : SA11AI.11514**

Amount of Each Receipt this Period  
4.29  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**ANN M MORTIMER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
09 / 30 / 2014

**Transaction ID : SA11AI.11515**

Amount of Each Receipt this Period  
4.29  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

0.00

**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 100 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. TAMMY Y MOUGEOT**

Mailing Address **37015 COBBLESTONE AVE**

City **GEISMAR** State **LA** Zip Code **70734**

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

Name of Employer **MOUGEOT ARCHITECTURE** Occupation **ARCHITECT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11079**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL J MUELLER**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11516**

Amount of Each Receipt this Period  
**4.29**

**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**ERIC J MURDOCK**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11517**

Amount of Each Receipt this Period  
**4.29**

**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**[MEMO ITEM]**

**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 101 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TED J MURPHY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11518**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS P MURPHY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11519**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11520**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

0.00

**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 102 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NAI LAKE CHARLES, LLC.**

Mailing Address 1424 RYAN ST

City LAKE CHARLES State LA Zip Code 70601

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11AI.10746**

Amount of Each Receipt this Period  
 1000.00

PERMISSIBLE FUNDS: SEE MEMO ATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MATT REDD**

Mailing Address 1424 RYAN ST

City LAKE CHARLES State LA Zip Code 70607

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

Name of Employer Occupation  
 NAI LAKE CHARLES, LLC. MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11AI.10746.0**

Amount of Each Receipt this Period  
 500.00

NAI LAKE CHARLES, LLC.: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**JOEL REDD**

Mailing Address 1424 RYAN ST

City LAKE CHARLES State LA Zip Code 70601

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

Name of Employer Occupation  
 NAI LAKE CHARLES, LLC. MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11AI.10746.1**

Amount of Each Receipt this Period  
 500.00

NAI LAKE CHARLES, LLC.: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**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 103 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. JAMES P NAUGHTON</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11521</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period HUNTON & WILLIAMS: PERMISSIBLE FUNDS 4.29		
FEC ID number of contributing federal political committee. C	<b>[MEMO ITEM]</b>		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date 12.87		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. ERIC J NEDELL</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11522</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period HUNTON & WILLIAMS: PERMISSIBLE FUNDS 4.29		
FEC ID number of contributing federal political committee. C	<b>[MEMO ITEM]</b>		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date 12.87		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. MICHAEL NEDZBALA</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11523</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period HUNTON & WILLIAMS: PERMISSIBLE FUNDS 4.29		
FEC ID number of contributing federal political committee. C	<b>[MEMO ITEM]</b>		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date 12.87		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. REBECCA KINNEY NELSON**

Mailing Address **6237 RIVERBEND BLVD**

City **BATON ROUGE** State **LA** Zip Code **70820**

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

Name of Employer **MAPP CONSTRUCTION** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : SA11AI.10609**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**HOWARD E NOBLES JR**

Mailing Address **36510 MORNING GLORY**

City **BATON ROUGE** State **LA** Zip Code **70808**

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

Name of Employer **JOHN H. CARTER** Occupation **CONSULTANT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11029**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**LONNIE D NUNLEY III**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11524**

Amount of Each Receipt this Period  
**4.29**

**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**[MEMO ITEM]**

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

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

**500.00**



**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 105 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PETER K O'BRIEN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11526**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**ANGELA O'BYRNE**

Mailing Address 3700 ORLEANS AVENUE  
APT. 5321

City New Orleans State LA Zip Code 70119

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

Name of Employer PEREZ, APC Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11AI.10721**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**JOHN T O'CONNOR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11527**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN D O'NEILL JR**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.87**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11528**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**BILL O'QUIN**

Mailing Address **2651 KLIENERT**

City **BATON ROUGE** State **LA** Zip Code **70806**

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

Name of Employer **FSO** Occupation **INTERNET PUBLISHER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.10977**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL A O'SHEA**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.87**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11529**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**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: PAGE 107 OF 240  
(check only one)  
 11a  11b  11c  11d  11e  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

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

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11525**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL OCONNOR**

Mailing Address 19430 SOUTH MUIRFIELD CIRCLE

City Baton Rouge State LA Zip Code 70810

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

Name of Employer Occupation  
THE CELTIC GROUP CHAIRMAN & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 22 / 2014

**Transaction ID : SA11AI.10834**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. GARY M OSORNO**

Mailing Address PO BOX 2283

City Kenner State LA Zip Code 70063

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

Name of Employer Occupation  
ACCUTRANS CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : SA11AI.10554**

Amount of Each Receipt this Period  
 350.00

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

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

2950.00

**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 108 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BRIAN V OTERO**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11530**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**DR. JAMES R. OURSO**

Mailing Address **8608 WARTELLE AVE**

City **BATON ROUGE** State **LA** Zip Code **70806**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 16 / 2014**

**Transaction ID : SA11AI.10629**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. MARTIN OZINGA III**

Mailing Address **12621 W. HADLEY ROAD**

City **HOMER GLEN** State **IL** Zip Code **60491**

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

Name of Employer **OZINGA BROS.** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 08 / 2014**

**Transaction ID : SA11AI.10706**

Amount of Each Receipt this Period  
**2600.00**

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

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

**3600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 240
	<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	

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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MARTIN OZINGA III**

Mailing Address 12621 W. HADLEY ROAD

City: HOMER GLEN State: IL Zip Code: 60491

FEC ID number of contributing federal political committee: C

Name of Employer: OZINGA BROS. Occupation: PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date: 3000.00

Date of Receipt: 09 / 08 / 2014

**Transaction ID : SA11AI.10707**

Amount of Each Receipt this Period: 400.00

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL P PALAMONE**

Mailing Address 577 CYPRESS DR

City: LULING State: LA Zip Code: 70070

FEC ID number of contributing federal political committee: C

Name of Employer: URBAN SYSTEMS, INC Occupation: CHIEF EXECUTIVE OFFICER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 09 / 30 / 2014

**Transaction ID : SA11AI.11116**

Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**RANDALL S PARKS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City: RICHMOND State: VA Zip Code: 23219-4074

FEC ID number of contributing federal political committee: C

Name of Employer: HUNTON & WILLIAMS Occupation: ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 12.87

Date of Receipt: 09 / 30 / 2014

**Transaction ID : SA11AI.11531**

Amount of Each Receipt this Period: 4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

1400.00

**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 110 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PETER S PARTEE SR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11532**

Amount of Each Receipt this Period  
 4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MR. DENNIS A. PASENTINE**

Mailing Address 2360 FIFTH ST

City Mandeville State LA Zip Code 70471

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

Name of Employer FLORIDA MARINE Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11AI.10805**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**DR. KIRK A PATRICK JR**

Mailing Address 1923 OLD CARRIAGE LN

City Baton Rouge State LA Zip Code 70806

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

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : SA11AI.10848**

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 111 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**J S PATTERSON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11533**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM S PATTERSON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11534**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. HARLON H. PEARCE**

Mailing Address 1775 SOULT ST

City MANDEVILLE State LA Zip Code 70448

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

Name of Employer HARLON'S LA FISH & SEAFOOD Occupation MANAGING MEMBER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11AI.10789**

Amount of Each Receipt this Period  
 500.00

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

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

500.00

**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 112 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**STEPHEN G PELTIER**

Mailing Address 101 ST LOUIS ST

City State Zip Code  
THIBODAUX LA 70301

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

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11108**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. J STEPHEN PERRY**

Mailing Address 404 NOTRE DAME STREET  
APT 4

City State Zip Code  
NEW ORLEANS LA 70130

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

Name of Employer Occupation  
NEW ORLEANS CONVENTION & VISITOR'S B PRESIDENT & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11AI.10594**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**DJORDJE PETKOSKI**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11535**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**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 113 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LARRY J. PICCIOLA**

Mailing Address 5402 HWY 1 SOUTH

City RACELAND State LA Zip Code 70394

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

Name of Employer ANGELETTE, PICCIOLA LLC Occupation PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11106**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**SAMUEL PLAUCHE**

Mailing Address 811 FIRST AVE., SUITE 630

City SEATTLE State WA Zip Code 98104

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

Name of Employer PLAUCHE & CARR LLP Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 05 / 2014

**Transaction ID : SA11AI.10526**

Amount of Each Receipt this Period  
1250.00

**C.** Full Name (Last, First, Middle Initial)  
**SAMUEL PLAUCHE**

Mailing Address 811 FIRST AVE., SUITE 630

City SEATTLE State WA Zip Code 98104

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

Name of Employer PLAUCHE & CARR LLP Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1563.88

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : SA11AI.11145**

Amount of Each Receipt this Period  
313.88

IN-KIND: FOOD & BEVERAGES

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

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

2063.88

**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 114 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM T. POE**

Mailing Address 36332 TOULOUSE ST

City State Zip Code  
PRAIRIEVILLE LA 70769

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

Name of Employer Occupation  
WILLIAM T. POE & ASSOCIATES, INC. EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : SA11AI.10854**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**ERIC R POGUE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11536**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MS. GLENDA S POLLARD**

Mailing Address 7920 WAYSIDE DRIVE

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
KELLER WILLIAMS RED STICK PTNR REALTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11AI.10618**

Amount of Each Receipt this Period  
250.00

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

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

2750.00

**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 115 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LAURENCE H POSORSKE**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11537**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**KURTIS A POWELL**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11538**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**LEWIS F POWELL III**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11539**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

**0.00**

**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 116 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. ANN L PRIDE**

Mailing Address 924 S SAINT ASAPH ST

City State Zip Code  
ALEXANDRIA VA 22314-4347

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

Name of Employer Occupation  
ENTERGY GOVERNMENT AFFAIRS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11016**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. JAMES R PURGERSON JR.**

Mailing Address 2512 KLEINERT AVE

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
CITIZENS BANK SENIOR VICE PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 14 / 2014

**Transaction ID : SA11AI.10543**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT T QUACKENBOSS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11540**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

750.00

**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 117 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DIONNE C RAINEY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11541**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**JOHN J RANGE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11542**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT S RAUSCH**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11543**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

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

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

0.00

**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 118 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BELYNDA B RECK**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11544**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**BAKER R RECTOR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11545**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**SHAWN P REGAN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11546**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

0.00

**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 119 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. SEAN E. REILLY**

Mailing Address **PO BOX 66338**

City **BATON ROUGE** State **LA** Zip Code **70896**

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

Name of Employer **LAMAR ADVERTISING** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : SA11AI.10781**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**SONA REWARI**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **12.87**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11547**

Amount of Each Receipt this Period  
**4.29**

**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**CLAUDE F REYNAUD JR**

Mailing Address **257 NAPOLEON ST**

City **BATON ROUGE** State **LA** Zip Code **70802**

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

Name of Employer **BREAZEALE, SACHSE, & WILSON, L.L.P.** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11071**

Amount of Each Receipt this Period  
**250.00**

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

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

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2014

Transaction ID : SA11AI.11548

Amount of Each Receipt this Period  
4.29  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL P RICHMAN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2014

Transaction ID : SA11AI.11549

Amount of Each Receipt this Period  
4.29  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
**DON RILEY**

Mailing Address 804 FAIRFAX ROAD

City ALEXANDRIA State VA Zip Code 22308

FEC ID number of contributing federal political committee. C

Name of Employer DAWSON & ASSOCIATES Occupation CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 11 / 2014

Transaction ID : SA11AI.10537

Amount of Each Receipt this Period  
250.00

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

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

250.00



**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 121 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JENNINGS G RITTER II**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.87**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11550**

Amount of Each Receipt this Period  
**4.29**  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**RITTER MAHER ARCHITECHTS, LLC**

Mailing Address **4880 BLUEBONNET BLVD**

City **BATON ROUGE** State **LA** Zip Code **70809**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 08 / 2014**

**Transaction ID : SA11AI.10718**

Amount of Each Receipt this Period  
**1250.00**  
**LLC INFORMATION REQUESTED**

**C.** Full Name (Last, First, Middle Initial)  
**STEPHEN MAHER**

Mailing Address **1176 CARTER AVE**

City **BATON ROUGE** State **LA** Zip Code **70806**

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

Name of Employer **RITTER MAHER ARCHITECHTS, LLC** Occupation **PARTNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**625.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 08 / 2014**

**Transaction ID : SA11AI.10718.0**

Amount of Each Receipt this Period  
**625.00**  
**RITTER MAHER ARCHITECHTS, LLC: PERMISSIBLE FUNDS**

**[MEMO ITEM]**

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SCOTT RITTER**

Mailing Address 4436 BROUSSARD ST

City State Zip Code  
BATON ROUGE LA 70808

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

Name of Employer Occupation  
RITTER MAHER ARCHITECHTS, LLC PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
625.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2014

**Transaction ID : SA11AI.10718.1**

Amount of Each Receipt this Period  
625.00

RITTER MAHER ARCHITECHTS, LLC: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**KATHY ROBB**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11551**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. RANDOLPH R. ROBB**

Mailing Address 1836 DENMARK DR

City State Zip Code  
ORANGE PARK FL 32003

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

Name of Employer Occupation  
CHENNAULT INTERNATIONAL AIRPORT AUT EXECUTIVE DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2014

**Transaction ID : SA11AI.10733**

Amount of Each Receipt this Period  
500.00

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

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

500.00

**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 123 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. JONALYN ROBERT</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014	
Mailing Address 7038 MONITEAU COURT		<b>Transaction ID : SA11AI.10908</b>	
City BATON ROUGE	State LA	Zip Code 70809	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer ROBERT REAL ESTATE	Occupation REALTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>B. MR. DAVID ROBERTS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 8461 UNITED PLAZA BLVD		<b>Transaction ID : SA11AI.11002</b>	
City BATON ROUGE	State LA	Zip Code 70809	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer EXCEL INDUSTRIAL	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) <b>C. FLIP ROBERTS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2014	
Mailing Address 1243 STEELE BLVD		<b>Transaction ID : SA11AI.10940</b>	
City BATON ROUGE	State LA	Zip Code 70806	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer BATON ROUGE GENERAL	Occupation MD		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3250.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 124 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DARYL B ROBERTSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11552</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.29 HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
FEC ID number of contributing federal political committee. <b>C</b>	<b>[MEMO ITEM]</b>		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 12.87		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. GREGORY B ROBERTSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11553</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.29 HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
FEC ID number of contributing federal political committee. <b>C</b>	<b>[MEMO ITEM]</b>		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 12.87		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. MS. WANDA RODRIGUE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 23 / 2014	
Mailing Address 112 E WINDSOR DR		<b>Transaction ID : SA11AI.10842</b>	
City THIBODAUX State LA Zip Code 70301	Amount of Each Receipt this Period _____ 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>	<b>[MEMO ITEM]</b>		
Name of Employer POTPOURRI Occupation OWNER	Election Cycle-to-Date _____ 1000.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1000.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT M ROLFE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11554**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**TREVOR K ROSS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11555**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**BRENT A ROSSER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11556**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 126 OF 240  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. LINDA S ROTH**

Mailing Address 16838 AMBERWOOD DR.

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2850.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : SA11AI.10912**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**MR RICHARD J ROTH**

Mailing Address 309 PLATER DR

City State Zip Code  
THIBODAUX LA 70301

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

Name of Employer Occupation  
SEA LEVEL CONSTRUCTION OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11069**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM L ROWE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11557**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

3100.00

**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 127 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MARGUERITE R RUBY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11558**

Amount of Each Receipt this Period  
4.29  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MARY NASH K RUSHER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.87

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11559**

Amount of Each Receipt this Period  
4.29  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**STEPHEN P SAUCIER**

Mailing Address 306 ARLINGTON DR

City METAIRIE State LA Zip Code 70001

FEC ID number of contributing federal political committee. C

Name of Employer JOHNSON RICE & CO. Occupation STOCK BROKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2014

**Transaction ID : SA11AI.10747**

Amount of Each Receipt this Period  
500.00

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

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

500.00

**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 128 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAUL SAWYER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address 11814 LAKE ESTATES AVE.		<b>Transaction ID : SA11AI.10946</b>	
City BATON ROUGE	State LA	Zip Code 70810	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer LOUISIANA ECONOMIC DEVELOPMENT	Occupation DIRECTOR OF FEDERAL PROGRAMSL		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00		

Full Name (Last, First, Middle Initial) <b>B. MR. THOMAS H SAWYER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 7954 WRENWOOD BLVD APT. B		<b>Transaction ID : SA11AI.10964</b>	
City BATON ROUGE	State LA	Zip Code 70809	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer TOM SAWYER & ASSOCIATES	Occupation HEALTHCARE CONSULTANT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. JOHN D. SCANLAN</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2014	
Mailing Address 913 S. BURNSIDE AVE		<b>Transaction ID : SA11AI.10571</b>	
City GONZALES	State LA	Zip Code 70737	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00 SEE REDESIGNATION BELOW	
Name of Employer EATEL	Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5350.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]



**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 129 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN D. SCANLAN**

Mailing Address **913 S. BURNSIDE AVE**

City **GONZALES** State **LA** Zip Code **70737**

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

Name of Employer **EATEL** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 08 / 2014**

**Transaction ID : SA11AI.11604**

Amount of Each Receipt this Period  
 -2400.00

SEE REDESIGNATION BELOW

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**JOHN D. SCANLAN**

Mailing Address **913 S. BURNSIDE AVE**

City **GONZALES** State **LA** Zip Code **70737**

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

Name of Employer **EATEL** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 08 / 2014**

**Transaction ID : SA11AI.11605**

Amount of Each Receipt this Period  
 2400.00

REDESIGNATED

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**CONRAD SCHATTE**

Mailing Address **2200 SOUTH BUCHANAN ST.**

City **ARLINGTON** State **VA** Zip Code **22206**

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

Name of Employer **ENTERGY** Occupation **DIRECTOR, FEDERAL GOVERNMENT AFFAI**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 27 / 2014**

**Transaction ID : SA11AI.10647**

Amount of Each Receipt this Period  
 500.00

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

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

500.00

**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 130 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MATTHEW A SCHLAPP**

Mailing Address 3812 WASHINGTON WOODS DR

City State Zip Code  
ALEXANDRIA VA 22309

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
COVE STRATEGIES PRINCIPAL

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11051**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**GREGORY J SCHMITT**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11560**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**JOHN R SCHNEIDER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11561**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JEFFREY P SCHROEDER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11562**

Amount of Each Receipt this Period  
 4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES E SCHWING**

Mailing Address 9422 COMMON STREET  
SUITE 2

City Baton Rouge State LA Zip Code 70809

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : SA11AI.10352**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**SEALE, SMITH, ZUBER & BARNETTE**

Mailing Address 8550 UNITED PLAZA BLVD  
SUITE 200

City Baton Rouge State LA Zip Code 70809

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11AI.10637**

Amount of Each Receipt this Period  
 250.00

INFORMATION REQUESTED

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

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

2850.00

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

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

FOR LINE NUMBER: PAGE 132 OF 240  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     11e 15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SEATTLE SHELLFISH LLC**

Mailing Address 2101 4TH AVENUE E  
SUITE 201

City State Zip Code  
OLYMPIA WA 98506

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : SA11AI.10564**

Amount of Each Receipt this Period  
500.00

PERMISSIBLE FUNDS: SEE MEMO ATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JAMES L. GIBBONS**

Mailing Address 2101 FOURTH AVENUE E  
SUITE 201

City State Zip Code  
SHELTON WA 98584

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

Name of Employer Occupation  
SEATTLE SHELLFISH LLC PRESIDENT

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : SA11AI.10564.0**

Amount of Each Receipt this Period  
500.00

SEATTLE SHELLFISH LLC

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**JAMES S SEEVERS JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11563**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

500.00

**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 133 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DOUGLASS P SELBY**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.89**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11564**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**SHANNON INVESTMENTS LLC**

Mailing Address **1244 LOBDELL AVENUE**

City **BATON ROUGE** State **LA** Zip Code **70806**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : SA11AI.10641**

Amount of Each Receipt this Period  
**250.00**  
 REFUNDED ON 10/14

**C.** Full Name (Last, First, Middle Initial)  
**JOEL R SHARP**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.89**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11565**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

**250.00**

**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 134 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. JAN H SHAW**

Mailing Address 2605 EAST LAKESHORE DRIVE

City State Zip Code  
BATON ROUGE LA 70808

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11031**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**DR. ROGER F. SHAW**

Mailing Address 2605 EAST LAKESHORE DRIVE

City State Zip Code  
BATON ROUGE LA 70808

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

Name of Employer Occupation  
ROGER F. SHAW, III, APOC OPTOMETRIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.10981**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL R SHEBELSKIE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11566**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

600.00

**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 135 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>BLAINE JOSEPH SHEETS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 6207 TEZCUCO COURT		<b>Transaction ID : SA11AI.10761</b>	
City GONZALES	State LA	Zip Code 70737	Amount of Each Receipt this Period _____ _____ 500.00
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			
Name of Employer SPECIALIZED INDUSTRIAL MAINTENANCE	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) <b>RYAN A SHORES</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11567</b>	
City RICHMOND	State VA	Zip Code 23219-4074	Amount of Each Receipt this Period _____ _____ 4.29 HUNTON & WILLIAMS: PERMISSIBLE FUNDS <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 12.89		

Full Name (Last, First, Middle Initial) <b>GEORGE P SIBLEY III</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11568</b>	
City RICHMOND	State VA	Zip Code 23219-4074	Amount of Each Receipt this Period _____ _____ 4.29 HUNTON & WILLIAMS: PERMISSIBLE FUNDS <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 12.89		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ _____ 500.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL J. SIEGEL**

Mailing Address **201 ST. CHARLES AVE**  
**SUITE 4411**

City **NEW ORLEANS** State **LA** Zip Code **70170**

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

Name of Employer **CORPORATE REALTY** Occupation **REAL ESTATE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : SA11AI.10757**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**MS. KELLY C SILLS**

Mailing Address **7020 ANNABELLE AVE**

City **BATON ROUGE** State **LA** Zip Code **70806**

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

Name of Employer **COASTAL BRIDGE COMPANY** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 23 / 2014**

**Transaction ID : SA11AI.10906**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**AARON P SIMPSON**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.89**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11569**

Amount of Each Receipt this Period  
**4.29**

**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**[MEMO ITEM]**

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

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

**2000.00**



**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 137 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. JO ANNE E SIRGADO</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11570</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period HUNTON & WILLIAMS: PERMISSIBLE FUNDS 4.29		
FEC ID number of contributing federal political committee. C	[MEMO ITEM]		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date 12.89		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. INA H. SMILEY</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 14464 L KELLER RD		<b>Transaction ID : SA11AI.10783</b>	
City SAINT AMANT State LA Zip Code 70774	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Election Cycle-to-Date 500.00		
Name of Employer HOMEMAKER Occupation HOMEMAKER			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. CARYL G SMITH</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11571</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period HUNTON & WILLIAMS: PERMISSIBLE FUNDS 4.29		
FEC ID number of contributing federal political committee. C	[MEMO ITEM]		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date 12.89		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	[ ]

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

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

FOR LINE NUMBER: PAGE 138 OF 240  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN R SMITH**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.89**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11572**

Amount of Each Receipt this Period  
**4.29**  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MS. NANCY SMITH**

Mailing Address **125 OLD SCHRIEVER HWY**

City **SCHRIEVER** State **LA** Zip Code **70395**

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

Name of Employer **TERRIBONNE PARISH SCHOOL BOARD** Occupation **BOARD MEMBER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11060**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. SAM JAMES SMITH JR.**

Mailing Address **PO BOX 2370**

City **GONZALES** State **LA** Zip Code **70707**

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

Name of Employer **SMITH TANK & STEEL, INC.** Occupation **PRESIDENT/CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : SA11AI.10759**

Amount of Each Receipt this Period  
**500.00**

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**STEPHEN C SMITH**

Mailing Address 125 OLD SCHRIEVER HWY.

City State Zip Code  
SCHRIEVER LA 70395

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

Name of Employer Occupation  
ALL SOUTH CONSULTING ENGINEERS, LLC PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11A1.10710**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**LISA J SOTTO**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11A1.11573**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**NICKLOS SPEYRER**

Mailing Address 135 GRACES DRIVE

City State Zip Code  
ST. GABRIEL LA 70808

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

Name of Employer Occupation  
SPEYRER CONSULTING, LLC PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 27 / 2014

**Transaction ID : SA11A1.10938**

Amount of Each Receipt this Period  
1000.00

**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 140 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. LINDA B SPRADLEY**

Mailing Address 15254 CADET CT

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
SPRADLEY & SPRADLEY, INC. PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11AI.10709**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. DAVIN OLIVER SPRING**

Mailing Address PO BOX 45750

City State Zip Code  
BATON ROUGE LA 71089

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

Name of Employer Occupation  
CAPITOL COMPANIES MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
583.34

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : SA11AI.10566**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**JOSEPH C STANKO JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11574**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

750.00

**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 141 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TODD M STENERSON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11575**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**JOHN J STENGER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11576**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. EVERETT STEWART**

Mailing Address PO BOX 80741

City BATON ROUGE State LA Zip Code 70898

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

Name of Employer LAMAR ADVERTISING Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : SA11AI.10356**

Amount of Each Receipt this Period  
 1000.00

**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 142 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GREG N STILLMAN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11577**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**M. G. STREAM**

Mailing Address P.O. BOX 40

City LAKE CHARLES State LA Zip Code 70602-0040

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

Name of Employer SELF Occupation INVESTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11AI.10744**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**FRADYN SUAREZ**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11578**

Amount of Each Receipt this Period  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
 4.29

**[MEMO ITEM]**

**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 143 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**C R SULLIVAN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11579**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**JEFFREY M SULLIVAN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11580**

Amount of Each Receipt this Period  
 4.29  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**CULLEN TALLEY**

Mailing Address 19142 BEAUJOLAES AVE.

City BATON ROUGE State LA Zip Code 70817

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

Name of Employer EDO INTERACTIVE Occupation EXECUTIVE DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : SA11AI.10953**

Amount of Each Receipt this Period  
 50.00

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

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

50.00

**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 144 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RAJA TALLURI MD**

Mailing Address 109 ACADIA LN

City THIBODAUX State LA Zip Code 70301

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

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.10996**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**BRIAN J TANENBAUM**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **12.89**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11581**

Amount of Each Receipt this Period  
**4.29**

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**ANDREW J TAPSCOTT**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **12.89**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11582**

Amount of Each Receipt this Period  
**4.29**

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**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 145 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GINA TARAJANO**

Mailing Address 6841 FOUNTAIN LANE

City State Zip Code  
BATON ROUGE LA 70809

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

Name of Employer Occupation  
PALA GROUP EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 17 / 2014

**Transaction ID : SA11AI.10815**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT M TATA**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11583**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

Mailing Address 5049 CATHEDRAL AVENUE, NW

City State Zip Code  
WASHINGTON DC 20016

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

Name of Employer Occupation  
OGILVY GOVERNMENT RELATIONS LOBBYIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.10980**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

**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 146 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WENDELL L TAYLOR**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.89**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11584**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM TAYLOR**

Mailing Address **3510 GRAVELLY BEACH LOOP NW**

City **OLYMPIA** State **WA** Zip Code **98502**

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

Name of Employer **TAYLOR SHELLFISH** Occupation **SHELLFISH FARMER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 07 / 2014**

**Transaction ID : SA11AI.10529**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM L TAYLOR JR**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.89**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11585**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

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

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

**500.00**

**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 147 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TED M. FALGOUT & ASSOCIATES, LLC**

Mailing Address 720 HAMILTON STREET

City State Zip Code  
LAROSE LA 70373

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.10716**

Amount of Each Receipt this Period

REFUNDED ON 10/2/2014

**B.** Full Name (Last, First, Middle Initial)  
**AUBREY T TEMPLE**

Mailing Address 4885 HWY 190 WEST

City State Zip Code  
DERIDDER LA 70634

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF INSURANCE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11127**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MS. LINDA TEMPLE**

Mailing Address 3000 DALRYMPLE DRIVE

City State Zip Code  
BATON ROUGE LA 70802

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11196**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RYAN M. TEMPLE**

Mailing Address 546 SHADY LAKE PKWY

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11061**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address P.O. BOX 249

City State Zip Code  
HAMMOND LA 70404

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

Name of Employer Occupation  
WORLEY COMPANIES EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11101**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**GARY E THOMPSON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11586**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SCOTT R. THOMPSON**

Mailing Address 14095 SUNRISE WAY

City ST. FRANCISVILLE State LA Zip Code 70775

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

Name of Employer VENYU Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : SA11AI.10572**

Amount of Each Receipt this Period  
 5000.00

SEE REDESIGNATION BELOW

**B.** Full Name (Last, First, Middle Initial)  
**SCOTT R. THOMPSON**

Mailing Address 14095 SUNRISE WAY

City ST. FRANCISVILLE State LA Zip Code 70775

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

Name of Employer VENYU Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : SA11AI.11194**

Amount of Each Receipt this Period  
 -2400.00

SEE REDESIGNATION BELOW

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**SCOTT R. THOMPSON**

Mailing Address 14095 SUNRISE WAY

City ST. FRANCISVILLE State LA Zip Code 70775

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

Name of Employer VENYU Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : SA11AI.11195**

Amount of Each Receipt this Period  
 2400.00

REDESIGNATED

**[MEMO ITEM]**

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD N TIESENGA**

Mailing Address 3 OAK BROOK CLUB DRIVE

City OAK BROOK State IL Zip Code 60523

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

Name of Employer TIESENGA GOTTLIEB & REINSMA LLP Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11AI.10694**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**B C TOLLEY III**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11587**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROLAND M TOUPS**

Mailing Address 1021 OAKLEY DR

City BATON ROUGE State LA Zip Code 70806

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

Name of Employer TURNER INDUSTRIES Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11075**

Amount of Each Receipt this Period  
2600.00

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

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

2850.00

**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 151 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TOWER LAND COMPANY, LLC**

Mailing Address **641 WEST PRIEN LAKE ROAD**

City **LAKE CHARLES** State **LA** Zip Code **70601**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : SA11AI.10639**

Amount of Each Receipt this Period  
**2600.00**

LLC INFORMATION REQUESTED

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL D TURGEON**

Mailing Address **147 UPPER MOUNTAIN AVE**

City **MONTCLAIR** State **NJ** Zip Code **07042**

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

Name of Employer Occupation  
**PRICEWATERHOUSE CPA**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 23 / 2014**

**Transaction ID : SA11AI.10887**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**ANDREW J TURNER**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer Occupation  
**HUNTON & WILLIAMS ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **12.89**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11588**

Amount of Each Receipt this Period  
**4.29**

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

**2800.00**

**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 152 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

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

Mailing Address **P. O. BOX 2750**

City **BATON ROUGE** State **LA** Zip Code **70821**

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

Name of Employer **TURNER INDUSTRIES** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify) **Runoff**

Election Cycle-to-Date **7000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : SA11A1.10775**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL A TURTON**

Mailing Address **800 A STREET**

City **WASHINGTON** State **DC** Zip Code **20003**

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

Name of Employer **ENTERGY** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11A1.11136**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM C TYSON**

Mailing Address **PO BOX 794**

City **PORT ALLEN** State **LA** Zip Code **70767**

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

Name of Employer **ATCHAFALAYA BASIN LEVEE DISTRICT** Occupation **EXECUTIVE DIRECTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 23 / 2014**

**Transaction ID : SA11A1.10895**

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 153 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JULIE I UNGERMAN**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.89**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11589**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MS. LINDA A VAN DER AA**

Mailing Address **506 WEST MAPLE STREET**

City **HINSDALE** State **IL** Zip Code **60521**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 08 / 2014**

**Transaction ID : SA11AI.10676**

Amount of Each Receipt this Period  
**2600.00**

**C.** Full Name (Last, First, Middle Initial)  
**TERRY L VAN DER AA**

Mailing Address **506 WEST MAPLE STREET**

City **HINSDALE** State **IL** Zip Code **60521**

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

Name of Employer **TLV HOLDINGS** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 08 / 2014**

**Transaction ID : SA11AI.10674**

Amount of Each Receipt this Period  
**2600.00**

**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: (check only one)	PAGE 154 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KENNETH VANDER WAL**

Mailing Address 55 DERBY CT

City OAK BROOK State IL Zip Code 60523

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2014

**Transaction ID : SA11AI.10657**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**MARK C VAN DEUSEN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11590**

Amount of Each Receipt this Period  
4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MS. JANICE VAN DYKE-ZEILSTRA**

Mailing Address 1447 FOX LANE

City HINSDALE State IL Zip Code 60521

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

Name of Employer DARWILL INC Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11AI.10686**

Amount of Each Receipt this Period  
1000.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. KATHERINE G VAUGHAN**

Mailing Address **211 DUTCH HIGHLAND LANE**

City **BATON ROUGE** State **LA** Zip Code **70810-4013**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 23 / 2014**

**Transaction ID : SA11AI.10874**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**LANIS J VIATOR**

Mailing Address **4715 E. CYPRESS LANDING**

City **LAKE CHARLES** State **LA** Zip Code **70605**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : SA11AI.10739**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**BENN VINCENT**

Mailing Address **6232 WINDRUSH HOLLOW**

City **BATON ROUGE** State **LA** Zip Code **70808**

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

Name of Employer **KEAN MILLER LLP** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 23 / 2014**

**Transaction ID : SA11AI.10840**

Amount of Each Receipt this Period  
**2600.00**

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

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

**3850.00**

**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 156 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DANIEL G VIVARELLI JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11591**

Amount of Each Receipt this Period  
4.29  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MARK R VOWELL**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
12.89

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.11592**

Amount of Each Receipt this Period  
4.29  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. WAYNE R VRIESMAN**

Mailing Address 316 TRINITY LN.

City OAK BROOK State IL Zip Code 60523-2557

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2014

**Transaction ID : SA11AI.10692**

Amount of Each Receipt this Period  
250.00

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

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

250.00

**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 157 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. GLENDA G WAGUESPACK**

Mailing Address 6650 PIKES LN

City State Zip Code  
BATON ROUGE LA 70808-4272

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.10619**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**AMANDA L WAIT**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11593**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**LINDA L WALSH**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11594**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

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

Mailing Address 543 SUNSET BLVD

City State Zip Code  
BATON ROUGE LA 70808

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
WASHER HILL & LIPSCOMB ARCHITECT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.10821**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM L WEHRUM**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11595**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MALCOLM C WEISS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.11596**

Amount of Each Receipt this Period

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RYAN WELCH**

Mailing Address 1099 NEW YORK AVENUE, NW  
SUITE 500

City State Zip Code  
WASHINGTON DC 20001

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

Name of Employer Occupation  
FORBES-TATE CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 24 / 2014

**Transaction ID : SA11AI.10930**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**COURTNEY WESTBROOK**

Mailing Address 7933 WALDEN ROAD

City State Zip Code  
BATON ROUGE LA 70808

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

Name of Employer Occupation  
MORAN PRINTING, INC. CEO/OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 09 / 2014

**Transaction ID : SA11AI.10727**

Amount of Each Receipt this Period  
1600.00

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT D. WESTERMAN**

Mailing Address 7 OAK ALLEY

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
SELF-EMPLOYED DENTIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11083**

Amount of Each Receipt this Period  
250.00

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

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

2100.00

**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 160 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

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

Mailing Address 120 SUMMER BREEZE LANE

City State Zip Code  
FREDERICKSBURG VA 22406

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

Name of Employer Occupation  
HBW RESOURCES CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : SA11AI.10936**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MS. CYNTHIA A WHITE**

Mailing Address 9150 OLD GARDEN AVE

City State Zip Code  
BATON ROUGE LA 70809

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

Name of Employer Occupation  
SELF-EMPLOYED REAL ESTATE MANAGEMENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : SA11AI.10916**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES WHITE**

Mailing Address 1250 FOREST GLEN SOUTH

City State Zip Code  
WINNETTA IL 60093

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

Name of Employer Occupation  
SELF-EMPLOYED BUSINESS EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11AI.10702**

Amount of Each Receipt this Period  
500.00

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

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

2500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. JENNIFER B WHITTINGTON**

Mailing Address 11823 LAKE ESTATES AVENUE

City	State	Zip Code
BATON ROUGE	LA	70810

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

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11Al.10607**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN F WILBRAHAM**

Mailing Address 5313 BENTON AVE

City	State	Zip Code
DOWNERS GROVE	IL	60515-5036

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

Name of Employer	Occupation
MUNICIPAL POINT ADVISORS	INVESTMENT MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11Al.10682**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**MS. KELLY A WILBRAHAM**

Mailing Address 5313 BENTON AVE

City	State	Zip Code
DOWNERS GROVE	IL	60515-5036

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

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11Al.10680**

Amount of Each Receipt this Period  
2600.00

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

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

5450.00

**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 162 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. STEVENS WILLETT</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014	
Mailing Address 1286 HWY 304		<b>Transaction ID : SA11AI.10934</b>	
City THIBODAUX	State LA	Zip Code 70301	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. AMY M WILLIAMS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.11597</b>	
City RICHMOND	State VA	Zip Code 23219-4074	Amount of Each Receipt this Period 4.29
FEC ID number of contributing federal political committee. C			
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 12.89		
		HUNTON & WILLIAMS: PERMISSIBLE FUNDS <b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C. MILES B WILLIAMS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2014	
Mailing Address 10711 THISTLEWOOD DRIVE		<b>Transaction ID : SA11AI.10986</b>	
City BATON ROUGE	State LA	Zip Code 70810	Amount of Each Receipt this Period 227.52
FEC ID number of contributing federal political committee. C			
Name of Employer SIGMA CONSULTING	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1227.52		
		IN-KIND: FOOD & BEVERAGES	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1227.52
<b>TOTAL</b> This Period (last page this line number only).....	1227.52

**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 163 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MILES B WILLIAMS**

Mailing Address 10711 THISTLEWOOD DRIVE

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
SIGMA CONSULTING EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3827.52**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11096**

Amount of Each Receipt this Period  
**2600.00**

SEE REDESIGNATION BELOW

**B.** Full Name (Last, First, Middle Initial)  
**MILES B WILLIAMS**

Mailing Address 10711 THISTLEWOOD DRIVE

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
SIGMA CONSULTING EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11192**

Amount of Each Receipt this Period  
**227.52**

REDESIGNATED  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MILES B WILLIAMS**

Mailing Address 10711 THISTLEWOOD DRIVE

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
SIGMA CONSULTING EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4055.04**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11606**

Amount of Each Receipt this Period  
**-227.52**

SEE REDESIGNATION BELOW  
**[MEMO ITEM]**

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

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

**2600.00**

**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 164 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HOLLY H WILLIAMSON**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.89**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11598**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**JAYNE P. WILLINGHAM**

Mailing Address **4050 BROUSSARD ST**

City **BATON ROUGE** State **LA** Zip Code **70808**

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

Name of Employer **SELF-EMPLOYED** Occupation **IMPORTER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : SA11AI.10807**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **52C BRANDON HALL DRIVE**

City **DESTREHAN** State **LA** Zip Code **70047**

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

Name of Employer **MOTIVA, NORCO REFINING COMPANY** Occupation **ENVIRONMENTAL COORDINATOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.10978**

Amount of Each Receipt this Period  
**250.00**

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SUSAN F WILTSIE**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**12.89**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11599**

Amount of Each Receipt this Period  
**4.29**  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM C WINDHAM**

Mailing Address **PO BOX 5037**

City **BOSSIER CITY** State **LA** Zip Code **71171**

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

Name of Employer **TURNER-WINDHAM OF MISSISSIPPI LLC** Occupation **MANAGING PARTNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : SA11AI.10625**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**KATHRYN WITTY**

Mailing Address **846 WOODGATE BLVD.**

City **BATON ROUGE** State **LA** Zip Code **70808**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : SA11AI.10616**

Amount of Each Receipt this Period  
**250.00**

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

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

**750.00**

**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 166 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KATHRYN WITTY**

Mailing Address **846 WOODGATE BLVD.**

City **BATON ROUGE** State **LA** Zip Code **70808**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 28 / 2014**

**Transaction ID : SA11AI.10941**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**ALLISON D WOOD**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **12.89**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11600**

Amount of Each Receipt this Period  
**4.29**

**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**RICHARD L WYATT JR**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **12.89**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.11601**

Amount of Each Receipt this Period  
**4.29**

**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**[MEMO ITEM]**

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

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

**200.00**

**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 167 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MR. JOHN A. YOUNG</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 17825 EAST AUGUSTA DR		<b>Transaction ID : SA11AI.10770</b>	
City BATON ROUGE	State LA	Zip Code 70810	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer YOUNG RANCH	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. MR. CHARLES F ZEILSTRA</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address 24 BRADFORD LN		<b>Transaction ID : SA11AI.10698</b>	
City OAKBROOK	State IL	Zip Code 60523	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) <b>C. MR. JOHN ZEILSTRA</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address 1447 FOX LANE		<b>Transaction ID : SA11AI.10688</b>	
City HINSDALE	State IL	Zip Code 60521	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer EVENHOUSE & CO., PC	Occupation CPA		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 2250.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 168 OF 240

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. VAN C ZEILSTRA**

Mailing Address 607 LAKEWOOD CT

City OAK BROOK State IL Zip Code 60523

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

Name of Employer VC2 INC Occupation REAL ESTATE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11AI.10678**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MYRA D ZERINGUE**

Mailing Address 208 ABIGAIL DR

City THIBODAUX State LA Zip Code 70301

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.10991**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**LEE B ZEUGIN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
 951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 12.89

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.11602**

Amount of Each Receipt this Period  
 4.29

HUNTON & WILLIAMS: PERMISSIBLE FUNDS  
**[MEMO ITEM]**

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

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

1500.00

209635.28



**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 169 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BUTLER SNOW POLITICAL ACTION COMMITTEE**

Mailing Address P. O. BOX 22567  
17TH FLOOR REGIONS PLAZA

City JACKSON State MS Zip Code 39225

FEC ID number of contributing federal political committee. **C** C00382275

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11C.11095**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**CANAL BARGE COMPANY INC PAC (CANAL BARGE PAC)**

Mailing Address 835 UNION STREET

City NEW ORLEANS State LA Zip Code 70112

FEC ID number of contributing federal political committee. **C** C00541110

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : SA11C.10545**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**CHRIS LOAR CAMPAIGN FUND**

Mailing Address 18462 VAN BROSSARD ROAD

City PRAIRIEVILLE State LA Zip Code 70769

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11C.10766**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
CRESCENT RIVER PORT PILOTS ASSOCIATION FEDERAL POLITICAL ACTION COMMITTEE/CRPPA FED PAC

Mailing Address 8712 HWY 23

City State Zip Code  
BELLE CHASSE LA 70037

FEC ID number of contributing federal political committee. **C** C00221077

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11C.10670**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**ECOLAB INC. POLITICAL ACTION COMMITTEE**

Mailing Address 370 WABASH STREET N.

City State Zip Code  
ST. PAUL MN 55102

FEC ID number of contributing federal political committee. **C** C00101485

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11C.10663**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**ECOLAB INC. POLITICAL ACTION COMMITTEE**

Mailing Address 370 WABASH STREET N.

City State Zip Code  
ST. PAUL MN 55102

FEC ID number of contributing federal political committee. **C** C00101485

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11C.11092**

Amount of Each Receipt this Period  
2000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HALLIBURTON COMPANY PAC**

Mailing Address 801 17TH ST NW 10TH FLOOR

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C00035691**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11C.11144**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**HDR, INC. PAC**

Mailing Address C/O COMERICA BANK, PAC SERVICES  
P.O. BOX 75000, MC2250

City State Zip Code  
DETROIT MI 48275

FEC ID number of contributing federal political committee. **C C00103903**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11C.10785**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**HORNBECK OFFSHORE SERVICES INC POLITICAL ACTION COMMITTEE**

Mailing Address 103 NORTH PARK BLVD SUITE 300

City State Zip Code  
COVINGTON LA 70433

FEC ID number of contributing federal political committee. **C C00424366**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11C.10793**

Amount of Each Receipt this Period  
1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 172 OF 240	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHNNY GUINN CAMPAIGN FUND**

Mailing Address 515 THIRTEENTH ST

City State Zip Code  
JENNINGS LA 70546

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2014

**Transaction ID : SA11C.10735**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL OCEAN INDUSTRIES ASSOCIATION (NOIA) POLITICAL ACTIO**

Mailing Address 1120 G STREET NW  
SUITE 900

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00409565

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11C.11142**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**OXBOW CARBON & MINERALS HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1601 FORUM PLACE  
SUITE 1400

City State Zip Code  
WEST PALM BEACH FL 33401

FEC ID number of contributing federal political committee. **C** C00436550

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11C.11091**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

**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 173 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PAT BRISTER CAMPAIGN FUND**

Mailing Address 108 AUDUBON LANE

City State Zip Code  
MANDEVILLE LA 70471

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2014

**Transaction ID : SA11C.10795**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**SHELL OIL COMPANY EMPLOYEES' POLITICAL AWARENESS COMMITTEE**

Mailing Address 1050 K STREET NW, SUITE 700

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00039503

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11C.11122**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS P. MARTINEZ CAMPAIGN ACCOUNT**

Mailing Address 13367 HWY 431

City State Zip Code  
ST. AMANT LA 70774

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2014

**Transaction ID : SA11C.10768**

Amount of Each Receipt this Period  
1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 240
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TUNICA-BILOXI TRIBE OF LA**

Mailing Address 150 MELACON RD

City MARKSVILLE State LA Zip Code 71351

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11C.11085**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**VAN NESS FELDMAN, LLP POLITICAL ACTION COMMITTEE**

Mailing Address 1050 THOMAS JEFFERSON STREET, NW

City WASHINGTON State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C** C00205369

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : SA11C.10562**

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 Y

Amount of Each Receipt this Period

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

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

2500.00

18000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 175 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AIRNET GROUP, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address PO BOX 11181		Amount of Each Disbursement this Period 308.82 <b>Transaction ID : SB17.10392</b>
City CHATTANOOGA	State TN	
Zip Code 37401	Purpose of Disbursement DATA MANAGEMENT SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AIRNET GROUP, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address PO BOX 11181		Amount of Each Disbursement this Period 636.15 <b>Transaction ID : SB17.10409</b>
City CHATTANOOGA	State TN	
Zip Code 37401	Purpose of Disbursement DATA MANAGEMENT SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AIRNET GROUP, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address PO BOX 11181		Amount of Each Disbursement this Period 515.03 <b>Transaction ID : SB17.10446</b>
City CHATTANOOGA	State TN	
Zip Code 37401	Purpose of Disbursement DATA MANAGEMENT SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1460.00
<b>TOTAL</b> 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 176 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AIRNET GROUP, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address PO BOX 11181		Amount of Each Disbursement this Period 636.15 <b>Transaction ID : SB17.10507</b>
City CHATTANOOGA	State TN	
Zip Code 37401	Purpose of Disbursement DATA MANAGEMENT SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2014
Mailing Address PO BOX 68900		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : SB17.11282</b>
City SEATTLE	State WA	
Zip Code 98168	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: AIR	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. ALBERTSONS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address 4857 GOVERNMENT ST		Amount of Each Disbursement this Period 41.10 <b>Transaction ID : SB17.11221</b>
City BATON ROUGE	State LA	
Zip Code 70806	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FOOD	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	636.15
<b>TOTAL</b> 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 177 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ALBERTSONS</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2014
Mailing Address 4857 GOVERNMENT ST		Amount of Each Disbursement this Period 5.14
City BATON ROUGE	State LA	
Zip Code 70806	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FOOD	Transaction ID : SB17.11303
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ALBERTSONS</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address 4857 GOVERNMENT ST		Amount of Each Disbursement this Period 36.22
City BATON ROUGE	State LA	
Zip Code 70806	Purpose of Disbursement CHASE CC 9/30 PAYMENT: TRAVEL: FOOD	Transaction ID : SB17.11330
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMAZON</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2014
Mailing Address 410 TERRY AVE N		Amount of Each Disbursement this Period 51.91
City SEATTLE	State WA	
Zip Code 98109	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11257
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 178 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMAZON</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2014
Mailing Address 410 TERRY AVE N		Amount of Each Disbursement this Period 118.00
City SEATTLE	State WA Zip Code 98109	
Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES		Transaction ID : SB17.11261
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. AMAZON</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2014
Mailing Address 410 TERRY AVE N		Amount of Each Disbursement this Period 118.00
City SEATTLE	State WA Zip Code 98109	
Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES		Transaction ID : SB17.11262
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. AMAZON</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2014
Mailing Address 410 TERRY AVE N		Amount of Each Disbursement this Period 51.91
City SEATTLE	State WA Zip Code 98109	
Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES		Transaction ID : SB17.11263
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 179 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMAZON</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2014
Mailing Address 410 TERRY AVE N		Amount of Each Disbursement this Period 51.91
City SEATTLE	State WA	
Zip Code 98109	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11264
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMAZON</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2014
Mailing Address 410 TERRY AVE N		Amount of Each Disbursement this Period 118.00
City SEATTLE	State WA	
Zip Code 98109	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11265
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 410 TERRY AVE N		Amount of Each Disbursement this Period 49.88
City SEATTLE	State WA	
Zip Code 98109	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11325
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 180 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN PRINTING CENTER</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 3482 DRUSILLA LN		Amount of Each Disbursement this Period 634.38
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 8/22 PAYMENT: PRINTING & DESIGN SERVICES	Transaction ID : SB17.11284
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN PRINTING CENTER</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 3482 DRUSILLA LN		Amount of Each Disbursement this Period 194.02
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 8/22 PAYMENT: PRINTING & DESIGN SERVICES	Transaction ID : SB17.11323
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ARENA ONLINE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 1780 WEST SEQUOIA VISTA CIRCLE		Amount of Each Disbursement this Period 180.00
City SALT LAKE CITY	State UT	
Zip Code 84101	Purpose of Disbursement SOFTWARE	Transaction ID : SB17.10447
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	180.00
<b>TOTAL</b> 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 181 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ASCENSION FESTIVALS AND CULTURAL COUNCIL, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 9039 ST. LANDRY RD.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.10394</b>
City GONZALEZ	State LA	
Zip Code 70737	Purpose of Disbursement EVENT REGISTRATION FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 7539 CORPORATE BLVD #145 TOWNE CENTER AT CEDAR LODGE		Amount of Each Disbursement this Period 52.86 <b>Transaction ID : SB17.11215</b>
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 8/22 PAYMENT: MOBILE PHONE EXPENSE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 7539 CORPORATE BLVD #145 TOWNE CENTER AT CEDAR LODGE		Amount of Each Disbursement this Period 51.19 <b>Transaction ID : SB17.11314</b>
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 8/22 PAYMENT: MOBILE PHONE EXPENSE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> 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 182 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BADINE SURFACE LOT</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2014
Mailing Address 304 BIENVILLE ST		Amount of Each Disbursement this Period \$ 12.00
City NEW ORLEANS	State LA	
Zip Code 70130	Purpose of Disbursement CHASE CC 8/22 PAYMENT: PARKING SERVICES	Transaction ID : SB17.11292
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BASS PRO SHOPS</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2014
Mailing Address 175 BASS PRO BLVD		Amount of Each Disbursement this Period \$ 76.91
City DENHAM SPRINGS	State LA	
Zip Code 70726	Purpose of Disbursement CHASE CC 9/30 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11359
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BATCHGEO, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address 3862 SE HAWTHORNE BLVD		Amount of Each Disbursement this Period \$ 99.00
City PORTLAND	State OR	
Zip Code 97202	Purpose of Disbursement CHASE CC 8/22 PAYMENT: SOFTWARE	Transaction ID : SB17.11217
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	\$ 0.00
<b>TOTAL</b> 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 183 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BATCHGEO, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address 3862 SE HAWTHORNE BLVD		Amount of Each Disbursement this Period 99.00
City PORTLAND	State OR	
Zip Code 97202	Purpose of Disbursement CHASE CC 8/22 PAYMENT: SOFTWARE	Transaction ID : SB17.11307
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BATON ROUGE PARKING</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 400 CONVENTION STREET		Amount of Each Disbursement this Period 6.00
City BATON ROUGE	State LA	
Zip Code 70802	Purpose of Disbursement CHASE CC 9/30 PAYMENT: PARKING SERVICES	Transaction ID : SB17.11356
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BUSINESS OFFICE SYSTEMS &amp; SERVICE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 4830 GOVERNMENT STREET		Amount of Each Disbursement this Period 360.58
City BATON ROUGE	State LA	
Zip Code 70806	Purpose of Disbursement EQUIPMENT RENTAL	Transaction ID : SB17.10449
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	360.58
<b>TOTAL</b> 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 184 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMANDA CARR</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 18216 125TH AVE SW		Amount of Each Disbursement this Period 313.88 <b>Transaction ID : SB17.11212</b>
City VASHON State WA Zip Code 98070	Purpose of Disbursement IN-KIND: FOOD & BEVERAGES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAUSEWAY SOLUTIONS LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address PO BOX 9114		Amount of Each Disbursement this Period 7000.00 <b>Transaction ID : SB17.10368</b>
City METAIRIE State LA Zip Code 70055	Purpose of Disbursement STRATEGY CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CAUSEWAY SOLUTIONS LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address PO BOX 9114		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : SB17.10450</b>
City METAIRIE State LA Zip Code 70055	Purpose of Disbursement STRATEGY CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10813.88
<b>TOTAL</b> 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 185 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CHASE CARD SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address PO BOX 94014		Amount of Each Disbursement this Period 6855.03 <b>Transaction ID : SB17.10386</b>
City PALATINE State IL Zip Code 60094-4014	Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMO ENTRIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CHASE CARD SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO BOX 94014		Amount of Each Disbursement this Period 3451.71 <b>Transaction ID : SB17.10514</b>
City PALATINE State IL Zip Code 60094-4014	Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMO ENTRIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CHEVRON</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 9936 AIRLINE HWY		Amount of Each Disbursement this Period 70.58 <b>Transaction ID : SB17.11276</b> <b>[MEMO ITEM]</b>
City BATON ROUGE State LA Zip Code 70816	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FUEL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10306.74
<b>TOTAL</b> 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 186 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CHEVRON</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 9936 AIRLINE HWY		Amount of Each Disbursement this Period 64.35
City BATON ROUGE	State LA	
Zip Code 70816	Purpose of Disbursement CHASE CC 9/30 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11338
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CIRCLE K</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2014
Mailing Address 5035 GOVERNMENT ST		Amount of Each Disbursement this Period 57.35
City BATON ROUGE	State LA	
Zip Code 70806	Purpose of Disbursement CHASE CC 9/30 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11344
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CORNER STORE</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 7515 PERKINS RD		Amount of Each Disbursement this Period 47.15
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FOOD	Transaction ID : SB17.11272
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 187 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. COX 4</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 18547 OAK GROVE PARKWAY		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.10500</b>
City PRAIRIEVILLE State LA Zip Code 70769	Purpose of Disbursement PLACED MEDIA Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ANDREW DAVID</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 1290 PARK PLACE BLVD #225		Amount of Each Disbursement this Period 168.20 <b>Transaction ID : SB17.10494</b>
City BATON ROUGE State LA Zip Code 70806	Purpose of Disbursement FIELD CONSULTING Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. DOMINOS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 2806 GOVERNMENT ST		Amount of Each Disbursement this Period 15.06 <b>Transaction ID : SB17.11322</b> <b>[MEMO ITEM]</b>
City BATON ROUGE State LA Zip Code 70806	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FOOD Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3168.20
<b>TOTAL</b> 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 188 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DOMINOS</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address 2806 GOVERNMENT ST		Amount of Each Disbursement this Period \$ 35.80
City BATON ROUGE	State LA	
Zip Code 70806	Purpose of Disbursement CHASE CC 9/30 PAYMENT: TRAVEL: FOOD	Transaction ID : SB17.11327
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DOUBLE TREE HOTELS</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2014
Mailing Address 1515 RHODE ISLAND AVE NW		Amount of Each Disbursement this Period \$ 216.46
City WASHINGTON	State DC	
Zip Code 20005	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: LODGING	Transaction ID : SB17.11237
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DRUSILLA</b>		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 3482 DRUSILLA LN		Amount of Each Disbursement this Period \$ 38.00
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FOOD	Transaction ID : SB17.11253
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	\$ 0.00
<b>TOTAL</b> 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 189 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. EXXON</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 4045 SCENIC HWY		Amount of Each Disbursement this Period 65.92
City BATON ROUGE	State LA	
Zip Code 70805	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11279
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EXXON</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 4045 SCENIC HWY		Amount of Each Disbursement this Period 55.84
City BATON ROUGE	State LA	
Zip Code 70805	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11326
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EXXON MOBILE</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2014
Mailing Address 400 THOMAS RD		Amount of Each Disbursement this Period 69.52
City BATON ROUGE	State LA	
Zip Code 70807	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11294
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 190 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FACEBOOK</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 1601 WILLOW RD		Amount of Each Disbursement this Period 24.00
City MENLO PARK	State CA	
Zip Code 94025	Purpose of Disbursement CHASE CC 8/22 PAYMENT: ONLINE ADVERTISING	Transaction ID : SB17.11275 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FACEBOOK</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 1601 WILLOW RD		Amount of Each Disbursement this Period 22.09
City MENLO PARK	State CA	
Zip Code 94025	Purpose of Disbursement CHASE CC 9/30 PAYMENT: ONLINE ADVERTISING	Transaction ID : SB17.11341 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FIREHOOK BAKERY</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 215 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 7.65
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FOOD	Transaction ID : SB17.11247 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 191 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FIVE STAR PRINTING</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 533 FLORIDA AVENUE SW		Amount of Each Disbursement this Period 120.45
City DENHAM SPRINGS	State LA Zip Code 70726	
Purpose of Disbursement CHASE CC 9/30 PAYMENT: PRINTING & DESIGN SERVICES		Transaction ID : SB17.11349
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. FIVE STAR PRINTING</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 533 FLORIDA AVENUE SW		Amount of Each Disbursement this Period 471.95
City DENHAM SPRINGS	State LA Zip Code 70726	
Purpose of Disbursement CHASE CC 9/30 PAYMENT: PRINTING & DESIGN SERVICES		Transaction ID : SB17.11339
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. FIVE STAR PRINTING</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 533 FLORIDA AVENUE SW		Amount of Each Disbursement this Period 180.68
City DENHAM SPRINGS	State LA Zip Code 70726	
Purpose of Disbursement CHASE CC 9/30 PAYMENT: PRINTING & DESIGN SERVICES		Transaction ID : SB17.11328
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 192 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FRANK'S RESTAURANT &amp; CATERING</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2014
Mailing Address 17425 AIRLINE HWY		Amount of Each Disbursement this Period 9.95
City PRAIRIEVILLE State LA Zip Code 70769	Purpose of Disbursement CHASE CC 9/30 PAYMENT: TRAVEL: FOOD	
Candidate Name	Category/Type	Transaction ID : SB17.11364 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. GOGO</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 1250 NORTH ARLINGTON HEIGHTS RD.,		Amount of Each Disbursement this Period 9.95
City ITASCA State IL Zip Code 60143	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: AIR	
Candidate Name	Category/Type	Transaction ID : SB17.11225 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. GOGO</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 1250 NORTH ARLINGTON HEIGHTS RD.,		Amount of Each Disbursement this Period 9.95
City ITASCA State IL Zip Code 60143	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: AIR	
Candidate Name	Category/Type	Transaction ID : SB17.11233 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9.00
<b>TOTAL</b> 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 193 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. GOGO</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 1250 NORTH ARLINGTON HEIGHTS RD.,		Amount of Each Disbursement this Period 9.95
City ITASCA State IL Zip Code 60143	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: AIR	
Candidate Name	Category/Type	<b>Transaction ID : SB17.11274</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GOGO</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 1250 NORTH ARLINGTON HEIGHTS RD.,		Amount of Each Disbursement this Period 9.95
City ITASCA State IL Zip Code 60143	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: AIR	
Candidate Name	Category/Type	<b>Transaction ID : SB17.11283</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. GOOD WOOD HARDWARE</b>		Date of Disbursement MM / DD / YYYY 07 / 29 / 2014
Mailing Address 7539 JEFFERSON HWY		Amount of Each Disbursement this Period 10.75
City BATON ROUGE State LA Zip Code 70806	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	<b>Transaction ID : SB17.11268</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 194 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. GOOD WOOD HARDWARE</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 7539 JEFFERSON HWY		Amount of Each Disbursement this Period 49.31
City BATON ROUGE	State LA	
Zip Code 70806	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11285
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GOOGLE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 1600 AMPHITHEATRE PARKWAY		Amount of Each Disbursement this Period 48.37
City MOUNTAIN VIEW	State CA	
Zip Code 94043	Purpose of Disbursement CHASE CC 9/30 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11333
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. GULA GRAHAM</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 499 S CAPITOL ST SW STE 420		Amount of Each Disbursement this Period 2215.37
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement FUNDRAISING CONSULTING	Transaction ID : SB17.10370
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2215.37
<b>TOTAL</b> 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 195 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CARISSA GRAVES</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014	
Mailing Address 1967 OLEANDER ST.			Amount of Each Disbursement this Period 250.00	
City BATON ROUGE	State LA	Zip Code 70806	Transaction ID : SB17.10385	
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. LIVINGSTON PARISH REPUBLICAN WOMEN</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014	
Mailing Address 30999 BARNETT LANE			Amount of Each Disbursement this Period 250.00	
City DENHAM SPRINGS	State LA	Zip Code 70726	Transaction ID : SB17.10385.0	
Purpose of Disbursement GRAVES REIMBURSEMENT: EVENT REGISTRATION FEE		Category/ Type		
Candidate Name			[MEMO ITEM]	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. CARISSA GRAVES</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 1967 OLEANDER ST.			Amount of Each Disbursement this Period 66.03	
City BATON ROUGE	State LA	Zip Code 70806	Transaction ID : SB17.10463	
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	316.03
<b>TOTAL</b> 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 196 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. COSTCO</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 10000 DOWNADELE AVE		Amount of Each Disbursement this Period 66.03
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement GRAVES REIMBURSEMENT: OFFICE SUPPLIES	Transaction ID : SB17.10463.0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CARISSA GRAVES</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 1967 OLEANDER ST.		Amount of Each Disbursement this Period 304.20
City BATON ROUGE	State LA	
Zip Code 70806	Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES	Transaction ID : SB17.10468
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. US AIRWAYS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 400 E SKY HARBOUR BOULEVARD		Amount of Each Disbursement this Period 304.20
City PHOENIX	State AZ	
Zip Code 85034	Purpose of Disbursement GRAVES REIMBURSEMENT: TRAVEL: AIR	Transaction ID : SB17.10468.0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	304.20
<b>TOTAL</b> 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 197 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. GARRET GRAVES</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014	
Mailing Address 1967 OLEANDER STREET			Amount of Each Disbursement this Period 191.49	
City BATON ROUGE	State LA	Zip Code 70806	Transaction ID : SB17.10451	
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. COSTCO</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014	
Mailing Address 10000 DOWNADELE AVE			Amount of Each Disbursement this Period 191.49	
City BATON ROUGE	State LA	Zip Code 70809	Transaction ID : SB17.10451.0	
Purpose of Disbursement GRAVES REIMBURSEMENT: OFFICE SUPPLIES		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. KURT GRAVES</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014	
Mailing Address 14555 MEMORIAL TOWER DRIVE			Amount of Each Disbursement this Period 600.00	
City BATON ROUGE	State LA	Zip Code 70810	Transaction ID : SB17.11206	
Purpose of Disbursement IN-KIND: POSTAGE		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	791.49
<b>TOTAL</b> 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 198 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. JERENE GUIDRY</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014	
Mailing Address 5396 COURTYARD DRIVE			Amount of Each Disbursement this Period 300.00	
City GONZALES	State LA	Zip Code 70737	Transaction ID : SB17.11209	
Purpose of Disbursement IN-KIND: EVENT SPONSORSHIP FEES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. JERENE GUIDRY</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014	
Mailing Address 5396 COURTYARD DRIVE			Amount of Each Disbursement this Period 380.00	
City GONZALES	State LA	Zip Code 70737	Transaction ID : SB17.11207	
Purpose of Disbursement IN-KIND: EVENT SPONSORSHIP FEES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. HAMPTON</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014	
Mailing Address 1201 CONVENTION CENTER BLVD			Amount of Each Disbursement this Period 146.57	
City NEW ORLEANS	State LA	Zip Code 70310	Transaction ID : SB17.11300	
Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: LODGING		Category/ Type		
Candidate Name			[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	680.00
<b>TOTAL</b> 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 199 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HILTON HOTELS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2014
Mailing Address 1919 CONNECTICUT AVE NW		Amount of Each Disbursement this Period 307.50
City WASHINGTON State DC Zip Code 20009	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: LODGING	
Candidate Name	Category/Type	Transaction ID : SB17.11260 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. HILTON HOTELS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 1919 CONNECTICUT AVE NW		Amount of Each Disbursement this Period 73.31
City WASHINGTON State DC Zip Code 20009	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: LODGING	
Candidate Name	Category/Type	Transaction ID : SB17.11280 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. HILTON HOTELS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 1919 CONNECTICUT AVE NW		Amount of Each Disbursement this Period 7.74
City WASHINGTON State DC Zip Code 20009	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: LODGING	
Candidate Name	Category/Type	Transaction ID : SB17.11281 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 200 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HOBBY LOBBY</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 3121 COLLEGE DR		Amount of Each Disbursement this Period 13.64
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11235
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HOME DEPOT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 8181 AIRLINE HIGHWAY		Amount of Each Disbursement this Period 453.11
City BATON ROUGE	State LA	
Zip Code 70815	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11270
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. HOME DEPOT</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2014
Mailing Address 8181 AIRLINE HIGHWAY		Amount of Each Disbursement this Period 630.47
City BATON ROUGE	State LA	
Zip Code 70815	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11289
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 201 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HOME DEPOT</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 8181 AIRLINE HIGHWAY		Amount of Each Disbursement this Period 789.56
City BATON ROUGE	State LA	
Zip Code 70815	Purpose of Disbursement CHASE CC 9/30 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11361
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HUNTER'S RUN GUN CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 1365 NORTH WEST DRIVE		Amount of Each Disbursement this Period 1926.50
City PORT ALLEN	State LA	
Zip Code 70767	Purpose of Disbursement FACILITY RENTAL	Transaction ID : SB17.10509
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. IHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 2260 HOME DEPOT DR		Amount of Each Disbursement this Period 30.48
City DENHAM SPRINGS	State LA	
Zip Code 70726	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FOOD	Transaction ID : SB17.11219
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1926.50
<b>TOTAL</b> 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 202 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. RYAN LAMBERT</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address PO BOX 64845		Amount of Each Disbursement this Period 3500.00
City BATON ROUGE	State LA	
Zip Code 70896	Purpose of Disbursement STRATEGY CONSULTING	Transaction ID : SB17.10375
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. RYAN LAMBERT</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address PO BOX 64845		Amount of Each Disbursement this Period 33.01
City BATON ROUGE	State LA	
Zip Code 70896	Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES	Transaction ID : SB17.10432
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CAFE AMERICAIN</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 7521 JEFFERSON HIGHWAY		Amount of Each Disbursement this Period 33.01
City BATON ROUGE	State LA	
Zip Code 70806	Purpose of Disbursement LAMBERT REIMBURSEMENT: TRAVEL: FOOD	Transaction ID : SB17.10432.0
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3533.01
<b>TOTAL</b> 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 203 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. RYAN LAMBERT</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014	
Mailing Address PO BOX 64845			Amount of Each Disbursement this Period 160.62	
City BATON ROUGE	State LA	Zip Code 70896	Transaction ID : SB17.10455	
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CIRCLE K</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014	
Mailing Address 5035 GOVERNMENT ST			Amount of Each Disbursement this Period 74.01	
City BATON ROUGE	State LA	Zip Code 70806	Transaction ID : SB17.10455.0	
Purpose of Disbursement LAMBERT REIMBURSEMENT: TRAVEL: FUEL		Category/ Type		
Candidate Name			[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. RYAN LAMBERT</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address PO BOX 64845			Amount of Each Disbursement this Period 3500.00	
City BATON ROUGE	State LA	Zip Code 70896	Transaction ID : SB17.10467	
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3660.62
<b>TOTAL</b> 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 204 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. LIVINGSTON PARISH CHAMBER OF COMMERCE</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2014
Mailing Address 133 NORTH HUMMEL ST		Amount of Each Disbursement this Period 25.00
City DENHAM SPRINGS State LA Zip Code 70726	Purpose of Disbursement CHASE CC 8/22 PAYMENT: EVENT REGISTRATION FEE	
Candidate Name	Category/Type	Transaction ID : SB17.11290 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. LIVINGSTON PARISH CHAMBER OF COMMERCE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 133 NORTH HUMMEL ST		Amount of Each Disbursement this Period 25.00
City DENHAM SPRINGS State LA Zip Code 70726	Purpose of Disbursement CHASE CC 9/30 PAYMENT: EVENT REGISTRATION FEE	
Candidate Name	Category/Type	Transaction ID : SB17.11336 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. LOUISIANA FIRE EXTINGUISHER INC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 8339 ATHENS AVE		Amount of Each Disbursement this Period 28.34
City BATON ROUGE State LA Zip Code 70814	Purpose of Disbursement CHASE CC 9/30 PAYMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.11337 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 205 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. LOUISIANA SECRETARY OF STATE</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 8585 ARCHIVES AVE		Amount of Each Disbursement this Period 900.00 <b>Transaction ID : SB17.10380</b>
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement QUALIFYING FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. JAKE LUECKE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 4005 NICHOLSON DRIVE		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : SB17.10474</b>
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement FIELD CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. MAGELLAN STRATEGIES BR</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 12491 PLANTATION CREEK		Amount of Each Disbursement this Period 17000.00 <b>Transaction ID : SB17.10502</b>
City GEISMAR	State LA	
Zip Code 70734	Purpose of Disbursement POLLING EXPENSE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	18100.00
<b>TOTAL</b> 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 206 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MAIL CHIMP</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2014
Mailing Address 512 MEANS STREET SUITE 404		Amount of Each Disbursement this Period 75.00
City ATLANTA State GA Zip Code 30318	Purpose of Disbursement CHASE CC 9/30 PAYMENT: ONLINE ADVERTISING	
Candidate Name		Transaction ID : SB17.11346 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. BRENDAN MARTINEZ</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address PO BOX 64845		Amount of Each Disbursement this Period 143.30
City BATON ROUGE State LA Zip Code 70896	Purpose of Disbursement FIELD CONSULTING	
Candidate Name		Transaction ID : SB17.10495
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. MARY LEE DONUTS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2014
Mailing Address 802 ONEAL LN		Amount of Each Disbursement this Period 24.60
City BATON ROUGE State LA Zip Code 70816	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FOOD	
Candidate Name		Transaction ID : SB17.11259 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	143.30
<b>TOTAL</b> 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 207 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MARY LEE DONUTS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2014
Mailing Address 802 ONEAL LN		Amount of Each Disbursement this Period 14.07
City BATON ROUGE	State LA	
Zip Code 70816	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FOOD	Transaction ID : SB17.11288
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MONJUNIS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 711 JEFFERSON HWY		Amount of Each Disbursement this Period 76.20
City BATON ROUGE	State LA	
Zip Code 70806	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FOOD	Transaction ID : SB17.11243
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NEW SOUTH PARKING</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2014
Mailing Address NEW ORLEANS INTERNATIONAL AIRPORT		Amount of Each Disbursement this Period 24.00
City KENNER	State LA	
Zip Code 70062	Purpose of Disbursement CHASE CC 9/30 PAYMENT: PARKING SERVICES	Transaction ID : SB17.11348
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 208 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. OFFICE DEPOT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 3116 COLLEGE DRIVE VILLAGE SQUARE SHOPPING CENTER		Amount of Each Disbursement this Period 69.73
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11248
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. OFFICE DEPOT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 3116 COLLEGE DRIVE VILLAGE SQUARE SHOPPING CENTER		Amount of Each Disbursement this Period 50.13
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11271
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. OFFICE DEPOT</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 3116 COLLEGE DRIVE VILLAGE SQUARE SHOPPING CENTER		Amount of Each Disbursement this Period 47.92
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement CHASE CC 9/30 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11355
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 209 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A. OVER NIGHT PRINTS**

Full Name (Last, First, Middle Initial)  
Mailing Address 7582 LAS VEGAS BLVD. S.  
SUITE #487

City LAS VEGAS State NV Zip Code 89123

Purpose of Disbursement CHASE CC 9/30 PAYMENT: PRINTING & DESIGN SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 03 / 2014

Amount of Each Disbursement this Period: 291.18

Transaction ID : SB17.11335

[MEMO ITEM]

**B. PARK 'N FLY**

Full Name (Last, First, Middle Initial)  
Mailing Address 1017 AIRLINE DR

City KENNER State LA Zip Code 70062

Purpose of Disbursement CHASE CC 8/22 PAYMENT: PARKING SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 24 / 2014

Amount of Each Disbursement this Period: 28.61

Transaction ID : SB17.11250

[MEMO ITEM]

**C. PHILLIP STUTTS & COMPANY, INC.**

Full Name (Last, First, Middle Initial)  
Mailing Address 1601 CONNECTICUT AVENUE  
SUITE 803

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 15 / 2014

Amount of Each Disbursement this Period: 7000.00

Transaction ID : SB17.10371

**SUBTOTAL** of Disbursements This Page (optional) ..... 7000.00

**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 210 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PHILLIP STUTTS &amp; COMPANY, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 1601 CONNECTICUT AVENUE SUITE 803		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : SB17.10453</b>
City WASHINGTON State DC Zip Code 20009	Purpose of Disbursement DIGITAL CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PHILLIP STUTTS &amp; COMPANY, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 1601 CONNECTICUT AVENUE SUITE 803		Amount of Each Disbursement this Period 30000.00 <b>Transaction ID : SB17.10454</b>
City WASHINGTON State DC Zip Code 20009	Purpose of Disbursement DIGITAL CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIGGLY WIGGLY</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 3873 CHOCTAW DR.		Amount of Each Disbursement this Period 69.00 <b>Transaction ID : SB17.11245</b> <b>[MEMO ITEM]</b>
City BATON ROUGE State LA Zip Code 70805	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FOOD	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	33500.00
<b>TOTAL</b> 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 211 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 144 2ND STREET 1ST FLOOR		Amount of Each Disbursement this Period 1.44 <b>Transaction ID : SB17.10367</b>
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 144 2ND STREET 1ST FLOOR		Amount of Each Disbursement this Period 143.76 <b>Transaction ID : SB17.10372</b>
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 144 2ND STREET 1ST FLOOR		Amount of Each Disbursement this Period 28.75 <b>Transaction ID : SB17.10381</b>
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	173.95
<b>TOTAL</b> 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 212 OF 240			
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014	
Mailing Address 144 2ND STREET 1ST FLOOR			Amount of Each Disbursement this Period 34.50	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.10382	
Purpose of Disbursement MERCHANT FEES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014	
Mailing Address 144 2ND STREET 1ST FLOOR			Amount of Each Disbursement this Period 71.88	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.10383	
Purpose of Disbursement MERCHANT FEES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014	
Mailing Address 144 2ND STREET 1ST FLOOR			Amount of Each Disbursement this Period 5.75	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.10389	
Purpose of Disbursement MERCHANT FEES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	112.13
<b>TOTAL</b> 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 213 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 144 2ND STREET 1ST FLOOR		Amount of Each Disbursement this Period 2.88
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement MERCHANT FEES	Category/Type	<b>Transaction ID : SB17.10390</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 144 2ND STREET 1ST FLOOR		Amount of Each Disbursement this Period 25.88
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement MERCHANT FEES	Category/Type	<b>Transaction ID : SB17.10391</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 144 2ND STREET 1ST FLOOR		Amount of Each Disbursement this Period 143.75
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement MERCHANT FEES	Category/Type	<b>Transaction ID : SB17.10445</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	172.51
<b>TOTAL</b> 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 214 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 144 2ND STREET 1ST FLOOR		Amount of Each Disbursement this Period 43.13
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.10460	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 144 2ND STREET 1ST FLOOR		Amount of Each Disbursement this Period 71.88
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.10461	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 144 2ND STREET 1ST FLOOR		Amount of Each Disbursement this Period 149.50
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.10462	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	264.51
<b>TOTAL</b> 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 215 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 144 2ND STREET 1ST FLOOR		Amount of Each Disbursement this Period 149.50 <b>Transaction ID : SB17.10488</b>
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 144 2ND STREET 1ST FLOOR		Amount of Each Disbursement this Period 178.25 <b>Transaction ID : SB17.10496</b>
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 144 2ND STREET 1ST FLOOR		Amount of Each Disbursement this Period 57.50 <b>Transaction ID : SB17.10497</b>
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	385.25
<b>TOTAL</b> 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 216 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 144 2ND STREET 1ST FLOOR		Amount of Each Disbursement this Period 40.25
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.10512	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 144 2ND STREET 1ST FLOOR		Amount of Each Disbursement this Period 115.00
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.10513	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 144 2ND STREET 1ST FLOOR		Amount of Each Disbursement this Period 189.75
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.10515	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	345.00
<b>TOTAL</b> 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 217 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SAMUEL PLAUCHE</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 811 FIRST AVE., SUITE 630		Amount of Each Disbursement this Period 313.88 <b>Transaction ID : SB17.11211</b>
City SEATTLE State WA Zip Code 98104	Purpose of Disbursement IN-KIND: FOOD & BEVERAGES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PEYTON POLLARD</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 7920 WAYSIDE DRIVE		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : SB17.10431</b>
City BATON ROUGE State LA Zip Code 70806	Purpose of Disbursement FIELD CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PEYTON POLLARD</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 7920 WAYSIDE DRIVE		Amount of Each Disbursement this Period 138.80 <b>Transaction ID : SB17.10487</b>
City BATON ROUGE State LA Zip Code 70806	Purpose of Disbursement FIELD CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	482.68
<b>TOTAL</b> 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 218 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**A. PREMIUM PARKING SERVICE**

Mailing Address 1010 COMMON ST, SUITE 2950

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement CHASE CC 8/22 PAYMENT: PARKING SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 08 / 2014

Amount of Each Disbursement this Period: 10.00

Transaction ID : SB17.11287

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. PRINT BILLING, INC**

Mailing Address 5211 E WASHINGTON BLVD

City COMMERCE State CA Zip Code 90040

Purpose of Disbursement CHASE CC 9/30 PAYMENT: PRINTING & DESIGN SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 29 / 2014

Amount of Each Disbursement this Period: 69.17

Transaction ID : SB17.11351

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**C. PRINT BILLING, INC**

Mailing Address 5211 E WASHINGTON BLVD

City COMMERCE State CA Zip Code 90040

Purpose of Disbursement CHASE CC 9/30 PAYMENT: PRINTING & DESIGN SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 29 / 2014

Amount of Each Disbursement this Period: 318.93

Transaction ID : SB17.11353

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

**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 219 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. RACETRAC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 14178 HIGHWAY 90		Amount of Each Disbursement this Period 35.70
City BOUTTE	State LA Zip Code 70039	
Purpose of Disbursement CHASE CC 9/30 PAYMENT: TRAVEL: FUEL		Transaction ID : SB17.11362
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. RED CURVE SOLUTIONS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 500 CUMMINGS CENTER SUITE 4400		Amount of Each Disbursement this Period 2435.24
City BEVERLY	State MA Zip Code 01915	
Purpose of Disbursement COMPLIANCE CONSULTING		Transaction ID : SB17.10373
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RED CURVE SOLUTIONS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 500 CUMMINGS CENTER SUITE 4400		Amount of Each Disbursement this Period 2625.20
City BEVERLY	State MA Zip Code 01915	
Purpose of Disbursement COMPLIANCE CONSULTING		Transaction ID : SB17.10466
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5060.44
<b>TOTAL</b> 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 220 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. RED CURVE SOLUTIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014	
Mailing Address 500 CUMMINGS CENTER SUITE 4400			Amount of Each Disbursement this Period 940.93	
City BEVERLY	State MA	Zip Code 01915	Transaction ID : SB17.10503	
Purpose of Disbursement DATABASE MANAGEMENT		Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. REGINELLI'S</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014	
Mailing Address 124 W. CHIMES ST			Amount of Each Disbursement this Period 264.61	
City BATON ROUGE	State LA	Zip Code 70802	Transaction ID : SB17.11239	
Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FOOD		Category/Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. REGINELLI'S PIZZERIA</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014	
Mailing Address 3244 MAGAZINE ST			Amount of Each Disbursement this Period 62.78	
City NEW ORLEANS	State LA	Zip Code 70115	Transaction ID : SB17.11329	
Purpose of Disbursement CHASE CC 9/30 PAYMENT: TRAVEL: FOOD		Category/Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	940.93
<b>TOTAL</b> 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 221 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. REI</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 6750 S 228TH ST		Amount of Each Disbursement this Period 133.07
City KENT	State WA	
Zip Code 98032	Purpose of Disbursement CHASE CC 9/30 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11358
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. KEVIN ROIG</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 2606 OCTAVIA STREET		Amount of Each Disbursement this Period 7500.00
City NEW ORLEANS	State LA	
Zip Code 70115	Purpose of Disbursement STRATEGY CONSULTING	Transaction ID : SB17.10365
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. KEVIN ROIG</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 2606 OCTAVIA STREET		Amount of Each Disbursement this Period 5000.00
City NEW ORLEANS	State LA	
Zip Code 70115	Purpose of Disbursement STRATEGY CONSULTING	Transaction ID : SB17.10452
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12500.00
<b>TOTAL</b> 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 222 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SEROPS EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 7474 CORPORATE BOULEVARD		Amount of Each Disbursement this Period 92.87
City BATON ROUGE	State LA	
Zip Code 70802	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FOOD	Transaction ID : SB17.11241 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SHELL</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address 3536 DRUSILLA LANE		Amount of Each Disbursement this Period 65.12
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11223 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SHELL</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2014
Mailing Address 3536 DRUSILLA LANE		Amount of Each Disbursement this Period 71.08
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11266 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 223 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SHELL</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2014
Mailing Address 3536 DRUSILLA LANE		Amount of Each Disbursement this Period 39.63
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11295
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SHELL</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address 3536 DRUSILLA LANE		Amount of Each Disbursement this Period 65.15
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11312
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SHELL</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 3536 DRUSILLA LANE		Amount of Each Disbursement this Period 57.67
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11320
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 224 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SHELL</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 3536 DRUSILLA LANE		Amount of Each Disbursement this Period 62.36
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11324
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SHELL</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 3536 DRUSILLA LANE		Amount of Each Disbursement this Period 67.20
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 9/30 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11360
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SHELL</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 3536 DRUSILLA LANE		Amount of Each Disbursement this Period 55.00
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 9/30 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11354
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 225 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SHELL</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2014
Mailing Address 3536 DRUSILLA LANE		Amount of Each Disbursement this Period 77.00
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 9/30 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11343
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SHELL</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 3536 DRUSILLA LANE		Amount of Each Disbursement this Period 49.83
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 9/30 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11342
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SHELL</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 3536 DRUSILLA LANE		Amount of Each Disbursement this Period 60.00
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement CHASE CC 9/30 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11331
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 226 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. JONATHAN MICHA SMITH</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 550 LEE DRIVE APT. 235		Amount of Each Disbursement this Period 800.00 <b>Transaction ID : SB17.10476</b>
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement FIELD CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 2702 LOVE FIELD DR		Amount of Each Disbursement this Period 8.00 <b>Transaction ID : SB17.11352</b>
City DALLAS	State TX	
Zip Code 75235	Purpose of Disbursement CHASE CC 9/30 PAYMENT: TRAVEL: AIR	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. SPEED ZONE</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 2385 COLLEGE DR		Amount of Each Disbursement this Period 40.65 <b>Transaction ID : SB17.11255</b>
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FOOD	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	800.00
<b>TOTAL</b> 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 227 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TAXICHARGE</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 2041 MARTIN LUTHER KING JR AVENUE		Amount of Each Disbursement this Period 16.51
City WASHINGTON State DC Zip Code 20020	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: GROUND TRANSPORTATION	
Candidate Name	Category/Type	Transaction ID : SB17.11229 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. TAXICHARGE</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 2041 MARTIN LUTHER KING JR AVENUE		Amount of Each Disbursement this Period 22.23
City WASHINGTON State DC Zip Code 20020	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: GROUND TRANSPORTATION	
Candidate Name	Category/Type	Transaction ID : SB17.11230 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. TAXICHARGE</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 2041 MARTIN LUTHER KING JR AVENUE		Amount of Each Disbursement this Period 20.00
City WASHINGTON State DC Zip Code 20020	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: GROUND TRANSPORTATION	
Candidate Name	Category/Type	Transaction ID : SB17.11231 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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 228 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A. TAXICHARGE**

Full Name (Last, First, Middle Initial)  
Mailing Address 2041 MARTIN LUTHER KING JR AVENUE

City WASHINGTON State DC Zip Code 20020

Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 24 / 2014

Amount of Each Disbursement this Period: 22.80

Transaction ID : SB17.11251

[MEMO ITEM]

**B. JOSHUA TAYLOR**

Full Name (Last, First, Middle Initial)  
Mailing Address 18603 WHITE OAK DRIVE

City PRAIRIEVILLE State LA Zip Code 70769

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 18 / 2014

Amount of Each Disbursement this Period: 1750.00

Transaction ID : SB17.10478

**C. TAYLOR MEDIA**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1802

City DENHAM SPRINGS State LA Zip Code 70727

Purpose of Disbursement COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 10 / 2014

Amount of Each Disbursement this Period: 6000.00

Transaction ID : SB17.10456

**SUBTOTAL** of Disbursements This Page (optional) ..... 7750.00

**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 229 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TEXACO</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 2382 N LOBDELL BLVD		Amount of Each Disbursement this Period 43.12
City BATON ROUGE	State LA	
Zip Code 70805	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11277
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TEXACO</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address 2382 N LOBDELL BLVD		Amount of Each Disbursement this Period 25.00
City BATON ROUGE	State LA	
Zip Code 70805	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FUEL	Transaction ID : SB17.11305
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE ORCHARD SOLUTIONS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 234 RUE BEAUREGARD STE 200		Amount of Each Disbursement this Period 377.37
City LAFAYETTE	State LA	
Zip Code 70508	Purpose of Disbursement RENT & UTILITIES	Transaction ID : SB17.10376
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	377.37
<b>TOTAL</b> 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 230 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**A. THE ORCHARD SOLUTIONS**

Mailing Address 234 RUE BEAUREGARD STE 200

City LAFAYETTE State LA Zip Code 70508

Purpose of Disbursement RENT & UTILITIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 02 / 2014

Amount of Each Disbursement this Period: 2387.50

Transaction ID : SB17.10438

Full Name (Last, First, Middle Initial)  
**B. THE ORCHARD SOLUTIONS**

Mailing Address 234 RUE BEAUREGARD STE 200

City LAFAYETTE State LA Zip Code 70508

Purpose of Disbursement RENT & UTILITIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 18 / 2014

Amount of Each Disbursement this Period: 547.77

Transaction ID : SB17.10490

Full Name (Last, First, Middle Initial)  
**C. THE POLITICAL FIRM**

Mailing Address 5555 HILTON AVE., SUITE 203

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 04 / 2014

Amount of Each Disbursement this Period: 1500.00

Transaction ID : SB17.10366

**SUBTOTAL** of Disbursements This Page (optional)..... 4435.27

**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 231 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A. THE POLITICAL FIRM**

Full Name (Last, First, Middle Initial)  
Mailing Address 5555 HILTON AVE., SUITE 203

City: BATON ROUGE State: LA Zip Code: 70808

Purpose of Disbursement: DIGITAL CONSULTING

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 08 / 15 / 2014

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB17.10377

**B. THE POLITICAL FIRM**

Full Name (Last, First, Middle Initial)  
Mailing Address 5555 HILTON AVE., SUITE 203

City: BATON ROUGE State: LA Zip Code: 70808

Purpose of Disbursement: PLACED MEDIA

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 09 / 11 / 2014

Amount of Each Disbursement this Period: 59532.50

Transaction ID : SB17.10459

**C. THE POLITICAL FIRM**

Full Name (Last, First, Middle Initial)  
Mailing Address 5555 HILTON AVE., SUITE 203

City: BATON ROUGE State: LA Zip Code: 70808

Purpose of Disbursement: PLACED MEDIA

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 09 / 24 / 2014

Amount of Each Disbursement this Period: 24070.17

Transaction ID : SB17.10504

**SUBTOTAL** of Disbursements This Page (optional) ..... 85602.67

**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 232 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. THE POLITICAL FIRM</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 5555 HILTON AVE., SUITE 203		Amount of Each Disbursement this Period 103032.50 <b>Transaction ID : SB17.10505</b>
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement PLACED MEDIA	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. TOBACCO PLUS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 4846 HIGHWAY 1		Amount of Each Disbursement this Period 62.35 <b>Transaction ID : SB17.11302</b> <b>[MEMO ITEM]</b>
City RACELAND	State LA	
Zip Code 70394	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FUEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. UBERCONFERENCE</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address 275 SACRAMENTO ST		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : SB17.11306</b> <b>[MEMO ITEM]</b>
City SAN FRANCISCO	State CA	
Zip Code 94111	Purpose of Disbursement CHASE CC 8/22 PAYMENT: MEETING EXPENSE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	103032.50
<b>TOTAL</b> 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 233 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. US AIRWAYS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 400 E SKY HARBOUR BOULEVARD		Amount of Each Disbursement this Period 246.20
City PHOENIX	State AZ	
Zip Code 85034	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: AIR	Transaction ID : SB17.11273
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 475 LENFANT PLAZA SW		Amount of Each Disbursement this Period 392.00
City WASHINGTON	State DC	
Zip Code 20260	Purpose of Disbursement CHASE CC 8/22 PAYMENT: POSTAGE	Transaction ID : SB17.11318
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 7090 SIEGEN LANE		Amount of Each Disbursement this Period 122.91
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement CHASE CC 8/22 PAYMENT: MOBILE PHONE EXPENSE	Transaction ID : SB17.11317
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 234 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DANIEL VERKAIK</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 6511 BRENTSHIRE DRIVE		Amount of Each Disbursement this Period 234.56 <b>Transaction ID : SB17.10471</b>
City CENTRAL State LA Zip Code 70818	Purpose of Disbursement FIELD CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VISTA PRINT</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2014
Mailing Address 95 HAYDEN AVENUE LEXINGTON		Amount of Each Disbursement this Period 7.50 <b>Transaction ID : SB17.11297</b>
City LEXINGTON State MA Zip Code 02421	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VISTA PRINT</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2014
Mailing Address 95 HAYDEN AVENUE LEXINGTON		Amount of Each Disbursement this Period 19.98 <b>Transaction ID : SB17.11298</b>
City LEXINGTON State MA Zip Code 02421	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	234.56
<b>TOTAL</b> 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 235 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. VISTA PRINT</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address 95 HAYDEN AVENUE LEXINGTON		Amount of Each Disbursement this Period 24.99
City LEXINGTON State MA Zip Code 02421	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.11313 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. VISTA PRINT</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 95 HAYDEN AVENUE LEXINGTON		Amount of Each Disbursement this Period 19.98
City LEXINGTON State MA Zip Code 02421	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.11319 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. WAL-MART</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 3132 COLLEGE DR VILLAGE SQUARE SHOPPING CENTER		Amount of Each Disbursement this Period 89.48
City BATON ROUGE State LA Zip Code 70808	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.11214 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 236 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WAL-MART</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 3132 COLLEGE DR VILLAGE SQUARE SHOPPING CENTER		Amount of Each Disbursement this Period 147.06
City State Zip Code BATON ROUGE LA 70808	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.11232 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. WAL-MART</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address 3132 COLLEGE DR VILLAGE SQUARE SHOPPING CENTER		Amount of Each Disbursement this Period 21.76
City State Zip Code BATON ROUGE LA 70808	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.11304 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. WAL-MART</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 3132 COLLEGE DR VILLAGE SQUARE SHOPPING CENTER		Amount of Each Disbursement this Period 197.10
City State Zip Code BATON ROUGE LA 70808	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.11315 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 237 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WAL-MART</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 3132 COLLEGE DR VILLAGE SQUARE SHOPPING CENTER		Amount of Each Disbursement this Period 98.85
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement CHASE CC 9/30 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11340
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WALGREENS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address 3550 GOVERNMENT STR		Amount of Each Disbursement this Period 12.14
City BATON ROUGE	State LA	
Zip Code 70806	Purpose of Disbursement CHASE CC 8/22 PAYMENT: OFFICE SUPPLIES	Transaction ID : SB17.11309
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WHITETAILS UNLIMITED</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address PO BOX 270		Amount of Each Disbursement this Period 40.00
City STURGEON BAY	State WI	
Zip Code 54235	Purpose of Disbursement CHASE CC 8/22 PAYMENT: EVENT REGISTRATION FEE	Transaction ID : SB17.11311
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 238 OF 240			
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WHOLE FOODS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 1440 P STREET NW		Amount of Each Disbursement this Period ..... 19.28
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement CHASE CC 8/22 PAYMENT: TRAVEL: FOOD	
Candidate Name	Category/Type	Transaction ID : SB17.11227  [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WHOLESALE SIGNS PLUS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 11386 DARRYL DR		Amount of Each Disbursement this Period ..... 7730.83
City BATON ROUGE State LA Zip Code 70815	Purpose of Disbursement PRINTING & DESIGN SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.10378
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WHOLESALE SIGNS PLUS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 11386 DARRYL DR		Amount of Each Disbursement this Period ..... 422.38
City BATON ROUGE State LA Zip Code 70815	Purpose of Disbursement PRINTING & DESIGN SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.10457
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	..... 8153.21
<b>TOTAL</b> 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 239 OF 240	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WHOLESALE SIGNS PLUS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 11386 DARRYL DR		Amount of Each Disbursement this Period 7298.10 <b>Transaction ID : SB17.10506</b>
City BATON ROUGE	State LA	
Zip Code 70815	Purpose of Disbursement PRINTING & DESIGN SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. MILES B WILLIAMS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2014
Mailing Address 10711 THISTLEWOOD DRIVE		Amount of Each Disbursement this Period 227.52 <b>Transaction ID : SB17.11210</b>
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement IN-KIND: FOOD & BEVERAGES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</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	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7525.62
<b>TOTAL</b> This Period (last page this line number only).....	337944.67

**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 240 OF 240			
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. KANNER &amp; WHITLEY, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 701 CAMP STREET			Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB20A.10465</b>	
City NEW ORLEANS	State LA	Zip Code 70130		
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B.</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) <b>C.</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:			

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