

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

MORGAN GRIFFITH FOR CONGRESS

ADDRESS (number and street)

PO BOX 361

Check if different than previously reported. (ACC)

CHRISTIANSBURG

VA

24068

2. FEC IDENTIFICATION NUMBER

C C00477240

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

VA

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

X

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

11 / 04 / 2014

in the State of

VA

5. Covering Period

M M / D D / Y Y Y Y

10 / 16 / 2014

through

M M / D D / Y Y Y Y

11 / 24 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer John G. Selph

Signature of Treasurer John G. Selph

[Electronically Filed]

Date

M M / D D / Y Y Y Y

12 / 04 / 2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

MORGAN GRIFFITH 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))....	49430.00	921321.50
(b) Total Contribution Refunds (from Line 20(d))	0.00	7000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	49430.00	914321.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	129810.72	607953.20
(b) Total Offsets to Operating Expenditures (from Line 14).....	162.00	3745.95
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	129648.72	604207.25
8. Cash on Hand at Close of Reporting Period (from Line 27).....	200335.21	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

MORGAN GRIFFITH FOR CONGRESS

Report Covering the Period: From: 10 / 16 / 2014 To: 11 / 24 / 2014

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 04 / 2014 (date of general election)	COLUMN C Total for 11 / 05 / 2014 (date after general election)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
11174.00	273412.33	0.00
(ii) Unitemized		
5006.00	64775.93	225.00
(iii) Total of contributions from individuals		
16180.00	338188.26	225.00
(b) Political Party Committees		
0.00	5000.00	0.00
(c) Other Political Committees		
33250.00	578133.24	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 52

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
49430.00	921321.50	225.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	117.41	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
162.00	3745.95	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.48	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
49592.00	925185.34	225.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

MORGAN GRIFFITH FOR CONGRESS

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
<input type="text" value="129810.72"/>	<input type="text" value="607953.20"/>	<input type="text" value="40688.76"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="5000.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 52

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	2000.00	0.00
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(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	7000.00	0.00
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21. OTHER DISBURSEMENTS

12400.00	261483.00	0.00
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

142210.72	876436.20	40688.76
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

49430.00	914321.50	225.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

129648.72	604207.25	40688.76
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	292953.93
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	49592.00
25. SUBTOTAL (add Line 23 and Line 24).....	342545.93
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	142210.72
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	200335.21

**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 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
George C. Barker Jr.

Mailing Address 320 N Broad St

City Salem State VA Zip Code 24153

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

Name of Employer self employed Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **425.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11AI.23332

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Charles S. Bartlett

Mailing Address 28083 Fairhaven Rd

City Abingdon State VA Zip Code 24211

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

Name of Employer Bartlett Geological Consultant Occupation Geologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.23460

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Michele B. Brooks

Mailing Address 275 Tulip Poplar St

City Weber City State VA Zip Code 24290

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

Name of Employer Penn Stuart & Eskridge 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
 10 / 28 / 2014

Transaction ID : SA11AI.23393

Amount of Each Receipt this Period
250.00

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

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

325.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Alan Bubes

Mailing Address 1601 31st St NW

City Washington State DC Zip Code 20007

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

Name of Employer Linens of the Week Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11AI.23320

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
George O. Burpeau

Mailing Address 435 7B Ridgefields Rd

City Kingsport State TN Zip Code 37660

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

Name of Employer Eastman Chemical Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.23318

Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
Mary H. Carico

Mailing Address 2728 Eagle Dr

City Draper State VA Zip Code 24324

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

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : SA11AI.23339

Amount of Each Receipt this Period
 100.00

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 9 OF 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
A. Gerald Ciaffone

Mailing Address 715 Red Ln

City Salem State VA Zip Code 24153

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

Name of Employer Roanoke City Schools Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11AI.23372

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Edward W. Clark Jr.

Mailing Address 5426 Bore Auger Rd

City Blue Ridge State VA Zip Code 24064

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

Name of Employer Afton Comm. Corp. Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 04 / 2014

Transaction ID : SA11AI.23525

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Durwood L. Counts

Mailing Address 706 Carlyle St

City Covington State VA Zip Code 24426

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

Name of Employer self employed Occupation Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.23461

Amount of Each Receipt this Period
100.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Elizabeth Dalton

Mailing Address 517 Meadow Ridge

City Radford State VA Zip Code 24141

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

Name of Employer Long & Foster Real Estate Inc Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11AI.23433

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Daniel B. Drysdale

Mailing Address PO Box 10518

City Blacksburg State VA Zip Code 24062

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

Name of Employer Drysdale Eye Center Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11AI.23377

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
George S. Dunlop

Mailing Address 2816 S Joyce St

City Arlington State VA Zip Code 22202

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

Name of Employer US Army Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11AI.23368

Amount of Each Receipt this Period
100.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert D. Etherton

Mailing Address 1930 Gillenwater Chapel Road

City Nickelsville State VA Zip Code 24271

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
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11AI.23326

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
John R. Forehand

Mailing Address 1 Clinic Dr

City Richlands State VA Zip Code 24641

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

Name of Employer Clinch Valley Physicians 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
 10 / 28 / 2014

Transaction ID : SA11AI.23384

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
J. Spencer Frantz

Mailing Address 1581 Dunrovin Ln

City Salem State VA Zip Code 24153

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
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11AI.23329

Amount of Each Receipt this Period
250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Shawn Lee Hines		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address Rt 1 Box 21		Transaction ID : SA11AI.23362
City Jonesville	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Lee County	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00	

Full Name (Last, First, Middle Initial) B. David Hutchinson		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 1380 Waldheim Road		Transaction ID : SA11AI.23363
City Salem	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Valley Distributing Corp	Occupation President	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) C. John J. Hutchinson		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 5367 Sundance Rd		Transaction ID : SA11AI.23364
City Salem	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Valley Distributing Corp	Occupation Operations Manager	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ross C. Jenkins Jr.

Mailing Address PO Box 1449

City State Zip Code
Gate City VA 24251

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

Name of Employer Occupation
Hob-Nob Restaurant Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
560.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.23392

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ross C. Jenkins Jr.

Mailing Address PO Box 1449

City State Zip Code
Gate City VA 24251

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

Name of Employer Occupation
Hob-Nob Restaurant Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
609.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.23413

Amount of Each Receipt this Period
49.00
In-kind - postage

C. Full Name (Last, First, Middle Initial)
John H. Kilgore Sr.

Mailing Address 2050 Manville Rd

City State Zip Code
Gate City VA 24251

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
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.23391

Amount of Each Receipt this Period
250.00

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

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

549.00

**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 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Amy P. Lampe

Mailing Address 460 Plantation Rd

City Martinsville State VA Zip Code 24112

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

Name of Employer Tacoma Management Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.23493

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
John C. Marion

Mailing Address PO Box 365

City Pennington Gap State VA Zip Code 24277

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

Name of Employer self employed Occupation Pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.23463

Amount of Each Receipt this Period
250.00

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

Mailing Address 166 Adwolfe Rd

City Marion State VA Zip Code 24354

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

Name of Employer Blue Ridge Knives Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 26 / 2014

Transaction ID : SA11AI.23458

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 15 OF 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Nancy C. McDonald

Mailing Address 480 Emerald Blvd

City Christiansburg State VA Zip Code 24073

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
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11AI.23369

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Larry McReynolds

Mailing Address PO Box 1768

City Coeburn State VA Zip Code 24230

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

Name of Employer Oliver Coal Sales Occupation Coal Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 04 / 2014

Transaction ID : SA11AI.23485

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Julian B Nolen

Mailing Address PO Box 565

City Floyd State VA Zip Code 24091

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

Name of Employer Self employed Occupation Electrical Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11AI.23333

Amount of Each Receipt this Period
150.00

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 16 OF 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jo Penley

Mailing Address PO Box 26

City State Zip Code
Gate City VA 24251

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
450.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.23390

Amount of Each Receipt this Period
450.00

B. Full Name (Last, First, Middle Initial)
Christopher W. Ratliff

Mailing Address PO Box 249

City State Zip Code
Pounding Mill VA 24637

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

Name of Employer Occupation
Gasco Drilling Inc Drilling

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11AI.23330

Amount of Each Receipt this Period
300.00

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

Mailing Address 1075 Cassatt Lane

City State Zip Code
Christiansburg VA 24073

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

Name of Employer Occupation
Rice Realty & Lade Sales 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
10 / 28 / 2014

Transaction ID : SA11AI.23379

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 17 OF 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ann Robinson

Mailing Address PO Box 11

City Falls Mills State VA Zip Code 24613

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

Name of Employer Tramline Inc. Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 04 / 2014

Transaction ID : SA11AI.23484

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Robert E. Rotanz

Mailing Address 313 N Broad St

City Salem State VA Zip Code 24153

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

Name of Employer Mac & Bob's Restaurant 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
 11 / 03 / 2014

Transaction ID : SA11AI.23486

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
James M. Shull

Mailing Address 209 W Jackson St Ste 204

City Gate City State VA Zip Code 24251

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

Name of Employer Self employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11AI.23389

Amount of Each Receipt this Period
500.00

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

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

1525.00

**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 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Albert W. Stewart

Mailing Address 2528 Montgomery Ave SW

City Roanoke	State VA	Zip Code 24015
-----------------	-------------	-------------------

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.23490

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Jeanne Stosser

Mailing Address PO Box 10397

City Blacksburg	State VA	Zip Code 24062
--------------------	-------------	-------------------

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

Name of Employer CMG Leasing/SAS Construction	Occupation Real Estate Developer
--	-------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.23464

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Kenneth D. Tuck

Mailing Address 3320 Franklin Rd SW

City Roanoke	State VA	Zip Code 24014
-----------------	-------------	-------------------

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

Name of Employer Vistar Eye Center	Occupation Physician
---------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 04 / 2014

Transaction ID : SA11AI.23526

Amount of Each Receipt this Period
250.00

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: PAGE 19 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Barbara D. Turk

Mailing Address 1002 Walker Dr

City Radford State VA Zip Code 24141

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 **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.23426

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Marshall P. Washburn

Mailing Address 115 Turnberry Dr

City Spartanburg State SC Zip Code 29306

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 **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11AI.23532

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
George A. Williams Jr.

Mailing Address 27 Fieldale Dr

City Radford State VA Zip Code 24141

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

Name of Employer Stifel Occupation Financial Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.23416

Amount of Each Receipt this Period
500.00

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 20 OF 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
George W. Williams

Mailing Address 1994 Browns gap Tn pk

City Charlottesville State VA Zip Code 22901

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

Name of Employer self employed Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2014

Transaction ID : SA11AI.23531

Amount of Each Receipt this Period
100.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

100.00

11174.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

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

Mailing Address 20 F STREET, N.W.
SUITE 350

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00181826

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11C.23455

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)

Mailing Address 1015 15TH ST. NW
SUITE 802

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010868

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
 10 / 25 / 2014

Transaction ID : SA11C.23344

Amount of Each Receipt this Period
4000.00

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

Mailing Address 325 SEVENTH STREET, NW
SUITE 700

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11C.23479

Amount of Each Receipt this Period
3000.00

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

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

9500.00

**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 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN MEDICAL ASSOCIATION

Mailing Address 25 MASSACHUSETTS AVENUE, NW
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C70001847**

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
 10 / 28 / 2014

Transaction ID : SA11C.23375

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
BRANCH BANK & TRUST POLITICAL ACTION COMMITTEE

Mailing Address 150 SOUTH STRATFORD ROAD
SUITE 401

City WINSTON SALEM State NC Zip Code 27104

FEC ID number of contributing federal political committee. **C C00075291**

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
 10 / 25 / 2014

Transaction ID : SA11C.23343

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DTE ENERGY CO. PAC - FEDERAL

Mailing Address ONE ENERGY PLAZA
ROOM 1583 WCB

City DETROIT State MI Zip Code 48226

FEC ID number of contributing federal political committee. **C C00081547**

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
 10 / 29 / 2014

Transaction ID : SA11C.23453

Amount of Each Receipt this Period
1000.00

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: PAGE 23 OF 52
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GOOD FUND, THE

Mailing Address **PO BOX 3404**

City **ALEXANDRIA** State **VA** Zip Code **22302**

FEC ID number of contributing federal political committee. **C C00409185**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11C.23423

Amount of Each Receipt this Period
4750.00

B. Full Name (Last, First, Middle Initial)
GOOGLE INC. NETPAC

Mailing Address **1101 NEW YORK AVENUE, NW
SECOND FLOOR**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00428623**

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
10 / 18 / 2014

Transaction ID : SA11C.23282

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
GUARDIAN INDUSTRIES CORP. FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address **2300 HARMON ROAD**

City **AUBURN HILLS** State **MI** Zip Code **48326**

FEC ID number of contributing federal political committee. **C C00239285**

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
10 / 28 / 2014

Transaction ID : SA11C.23376

Amount of Each Receipt this Period
1000.00

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

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

6750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Kilgore for Delegate

Mailing Address PO Box 669

City State Zip Code
Gate City VA 24251

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11C.23387

Amount of Each Receipt this Period
 1000.00
 made with permissible funds

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 Telestar Ct.

City State Zip Code
Falls Church VA 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11C.23480

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
PHILLIPS 66 PAC

Mailing Address 670 ADAMS BUILDING
411 SOUTH KEELER AVENUE

City State Zip Code
BARTLESVILLE OK 74003

FEC ID number of contributing federal political committee. **C** C00513549

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 25 / 2014

Transaction ID : SA11C.23341

Amount of Each Receipt this Period
 1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 52
	<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)
MORGAN GRIFFITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SERCO INC. POLITICAL ACTION COMMITTEE (SERCO PAC)

Mailing Address 1818 LIBRARY STREET
SUITE 1000

City RESTON State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C** C00402669

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11C.23311

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
TEVA PHARMACEUTICALS USA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 25 MASSACHUSETTS AVENUE, NW
SUITE 440

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00434811

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
10 / 29 / 2014

Transaction ID : SA11C.23454

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
THE CATERPILLAR INC. EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address 100 N.E. ADAMS

City PEORIA State IL Zip Code 61629

FEC ID number of contributing federal political committee. **C** C00148031

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
10 / 20 / 2014

Transaction ID : SA11C.23313

Amount of Each Receipt this Period
3000.00

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

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

8000.00

33250.00

**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 52
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MORGAN GRIFFITH FOR CONGRESS

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

Mailing Address PO Box 3009

City Omaha State NE Zip Code 68103

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA14.23361

Amount of Each Receipt this Period
 162.00
 refund of overpayment

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

162.00

162.00

**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 27 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Apple Online Store		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014
Mailing Address 1 Infinite Loop		Amount of Each Disbursement this Period 1157.25 Transaction ID : SB17.23653
City Cupertino	State CA	
Zip Code 95014	Purpose of Disbursement campaign equipment	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Best Western - Radford		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 1501 Tyler Ave		Amount of Each Disbursement this Period 65.28 Transaction ID : SB17.23639
City Radford	State VA	
Zip Code 24141	Purpose of Disbursement lodging	Category/ Type 002
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) c. Best Western - Radford		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 1501 Tyler Ave		Amount of Each Disbursement this Period 65.28 Transaction ID : SB17.23641
City Radford	State VA	
Zip Code 24141	Purpose of Disbursement lodging	Category/ Type 002
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:	

SUBTOTAL of Disbursements This Page (optional).....	1287.81
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 52			
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Best Western - Radford			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014	
Mailing Address 1501 Tyler Ave			Amount of Each Disbursement this Period 65.28	
City Radford	State VA	Zip Code 24141	Transaction ID : SB17.23642	
Purpose of Disbursement lodging		Category/ Type 002		
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. Best Western - Radford			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014	
Mailing Address 1501 Tyler Ave			Amount of Each Disbursement this Period 65.28	
City Radford	State VA	Zip Code 24141	Transaction ID : SB17.23643	
Purpose of Disbursement lodging		Category/ Type 002		
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) C. Best Western - Radford			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014	
Mailing Address 1501 Tyler Ave			Amount of Each Disbursement this Period 76.80	
City Radford	State VA	Zip Code 24141	Transaction ID : SB17.23645	
Purpose of Disbursement lodging		Category/ Type 002		
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:				

SUBTOTAL of Disbursements This Page (optional).....	207.36
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 29 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bobby May Advertising Specialties		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 15054 Hurley Road		Amount of Each Disbursement this Period 4163.86 Transaction ID : SB17.23474
City Hurley	State VA	
Zip Code 24620	Purpose of Disbursement printing - campaign materials	Category/ Type 006
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. Bobby May Advertising Specialties		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 15054 Hurley Road		Amount of Each Disbursement this Period 7515.35 Transaction ID : SB17.23519
City Hurley	State VA	
Zip Code 24620	Purpose of Disbursement printing - campaign materials	Category/ Type 006
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) c. Jason Brown		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 92 South Angle Ave		Amount of Each Disbursement this Period 470.00 Transaction ID : SB17.23506
City Lebanon	State VA	
Zip Code 24266	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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)	

SUBTOTAL of Disbursements This Page (optional).....	12149.21
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Campaign Marketing Strategies Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 125 N Oakland St		Amount of Each Disbursement this Period 6564.65
City Arlington	State VA	
Zip Code 22203	Purpose of Disbursement Voter contact phone calls	Transaction ID : SB17.23595
Candidate Name	Category/Type 001	
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. Carlyle Gregory Company LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 140 Little Falls St Ste 104		Amount of Each Disbursement this Period 2000.00
City Falls Church	State VA	
Zip Code 22046	Purpose of Disbursement campaign consulting - management	Transaction ID : SB17.23495
Candidate Name	Category/Type 001	
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) c. Carlyle Gregory Company LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 140 Little Falls St Ste 104		Amount of Each Disbursement this Period 303.05
City Falls Church	State VA	
Zip Code 22046	Purpose of Disbursement mileage and lodging reimbursement	Transaction ID : SB17.23596
Candidate Name	Category/Type 002	
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:		

SUBTOTAL of Disbursements This Page (optional).....	8867.70
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gus Chafin		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 242 Church Hill Rd		Amount of Each Disbursement this Period 340.00 Transaction ID : SB17.23507
City Lebanon	State VA	
Zip Code 24266	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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. Gus Chafin		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 242 Church Hill Rd		Amount of Each Disbursement this Period 260.00 Transaction ID : SB17.23543
City Lebanon	State VA	
Zip Code 24266	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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) c. City of Salem		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2014
Mailing Address PO Box 869		Amount of Each Disbursement this Period 604.41 Transaction ID : SB17.23634
City Salem	State VA	
Zip Code 24153	Purpose of Disbursement office utilities	Category/ Type 001
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)	

SUBTOTAL of Disbursements This Page (optional).....	1204.41
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sabrina Coleman		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 2294 Lynn Camp Branch Rd		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.23510
City Grundy	State VA	
Zip Code 24614	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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. Sabrina Coleman		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 2294 Lynn Camp Branch Rd		Amount of Each Disbursement this Period 490.00 Transaction ID : SB17.23546
City Grundy	State VA	
Zip Code 24614	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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) c. Constant Contact		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 1601 Trapelo Rd Ste 329		Amount of Each Disbursement this Period 195.00 Transaction ID : SB17.23297
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement email services	Category/ Type 001
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:	

SUBTOTAL of Disbursements This Page (optional).....	985.00
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 33 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ambler Dumler		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 23716 Fernbank Drive		Amount of Each Disbursement this Period 266.00 Transaction ID : SB17.23538
City Abingdon	State VA Zip Code 24211	
Purpose of Disbursement campaign consulting - staff	Category/Type 001	Amount of Each Disbursement this Period 1003.77 Transaction ID : SB17.23659 [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. FedEx		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 1003.77 Transaction ID : SB17.23659 [MEMO ITEM]
City Pittsburgh	State PA Zip Code 15250	
Purpose of Disbursement printing - reimbursed to Raney Quirk 11/24	Category/Type	Amount of Each Disbursement this Period 17.82 Transaction ID : SB17.23560
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) C. FedEx		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 17.82 Transaction ID : SB17.23560
City Pittsburgh	State PA Zip Code 15250	
Purpose of Disbursement shipping	Category/Type 001	Amount of Each Disbursement this Period 283.82
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:		

SUBTOTAL of Disbursements This Page (optional).....	283.82
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FedEx		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 484.98
City Pittsburgh	State PA	
Zip Code 15250	Purpose of Disbursement printing - campaign materials - reimbursed to Raney Quirk 10/30	Transaction ID : SB17.23502
Candidate Name	Category/Type 001	
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. Forest Consulting Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address PO Box 1473		Amount of Each Disbursement this Period 2250.00
City Richmond	State VA	
Zip Code 23218	Purpose of Disbursement accounting and reporting services	Transaction ID : SB17.23497
Candidate Name	Category/Type 001	
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) c. Angie M. Hall		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 7141 Gate 10 Rd		Amount of Each Disbursement this Period 657.80
City Radford	State VA	
Zip Code 24141	Purpose of Disbursement fundraising consulting	Transaction ID : SB17.23658
Candidate Name	Category/Type 003	
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:		

SUBTOTAL of Disbursements This Page (optional).....	2907.80
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Helms Candy Company Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 3001 Lee Highway		Amount of Each Disbursement this Period 214.99 Transaction ID : SB17.23355
City Bristol	State VA	
Zip Code 24202	Purpose of Disbursement campaign items	Category/ Type 006
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. K. Michelle Jenkins		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address PO Box 1449		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.23594
City Gate City	State VA	
Zip Code 24251	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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) C. K. Michelle Jenkins		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address PO Box 1449		Amount of Each Disbursement this Period 657.80 Transaction ID : SB17.23656
City Gate City	State VA	
Zip Code 24251	Purpose of Disbursement fundraising consulting	Category/ Type 003
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:	

SUBTOTAL of Disbursements This Page (optional).....	5872.79
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Serena Jones		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 7151 Mullins Dr		Amount of Each Disbursement this Period 480.00 Transaction ID : SB17.23514
City Saltville	State VA	
Zip Code 24370	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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. Serena Jones		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 7151 Mullins Dr		Amount of Each Disbursement this Period 370.00 Transaction ID : SB17.23550
City Saltville	State VA	
Zip Code 24370	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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) c. Jones Day		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 51 Louisiana Avenue, N.W.		Amount of Each Disbursement this Period 40000.00 Transaction ID : SB17.23345
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement legal fees	Category/ Type 001
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:	

SUBTOTAL of Disbursements This Page (optional).....	40850.00
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 37 OF 52		
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kroger - Salem		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 1477 W Main St		Amount of Each Disbursement this Period 15.06 Transaction ID : SB17.23555
City Salem State VA Zip Code 24153	Purpose of Disbursement office supplies Candidate Name Category/Type 001	
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. Kroger - Salem		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 1477 W Main St		Amount of Each Disbursement this Period 47.02 Transaction ID : SB17.23559
City Salem State VA Zip Code 24153	Purpose of Disbursement travel - gas Candidate Name Category/Type 002	
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) c. Kroger - Salem		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 1477 W Main St		Amount of Each Disbursement this Period 23.14 Transaction ID : SB17.23575
City Salem State VA Zip Code 24153	Purpose of Disbursement travel - gas Candidate Name Category/Type 002	
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:	

SUBTOTAL of Disbursements This Page (optional).....	85.22
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 52		
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kroger - Salem		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 1477 W Main St		Amount of Each Disbursement this Period 44.32
City Salem	State VA Zip Code 24153	
Purpose of Disbursement travel - gas	Category/Type 002	Transaction ID : SB17.23584
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. Kroger - Salem		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 1477 W Main St		Amount of Each Disbursement this Period 30.62
City Salem	State VA Zip Code 24153	
Purpose of Disbursement travel - gas	Category/Type 002	Transaction ID : SB17.23587
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) c. Mac and Bob's		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 316 E Main St		Amount of Each Disbursement this Period 40.81
City Salem	State VA Zip Code 24153	
Purpose of Disbursement travel - food	Category/Type 002	Transaction ID : SB17.23554
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:		

SUBTOTAL of Disbursements This Page (optional).....	115.75
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kelly L. McCollum		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 511 Bashford Lane		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.23591
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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. Kelly L. McCollum		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 511 Bashford Lane		Amount of Each Disbursement this Period 228.41 Transaction ID : SB17.23592
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement mileage and lodging reimbursement	Category/ Type 002
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) c. Chris McCowan		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 2294 Lynn Camp Branch Rd		Amount of Each Disbursement this Period 230.00 Transaction ID : SB17.23511
City Grundy	State VA	
Zip Code 24614	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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:	

SUBTOTAL of Disbursements This Page (optional).....	2458.41
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Chris McCowan		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 2294 Lynn Camp Branch Rd		Amount of Each Disbursement this Period 390.00 Transaction ID : SB17.23547
City Grundy	State VA	
Zip Code 24614	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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. Ashlee McMillian		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 270 Tugh Mountain Rd		Amount of Each Disbursement this Period 390.00 Transaction ID : SB17.23548
City Marion	State VA	
Zip Code 24354	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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) c. Miller Spence Group LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address PO Box 7557		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.23496
City Arlington	State VA	
Zip Code 22207	Purpose of Disbursement fundraising consulting	Category/ Type 003
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)	

SUBTOTAL of Disbursements This Page (optional).....	2780.00
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 41 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 2 E Main St		Amount of Each Disbursement this Period 861.04
City Christiansburg	State VA	
Zip Code 24073	Purpose of Disbursement postage- reimbursed to Raney Quirk 10/30	Transaction ID : SB17.23503
Candidate Name	001 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. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 2 E Main St		Amount of Each Disbursement this Period 19.60
City Christiansburg	State VA	
Zip Code 24073	Purpose of Disbursement postage	Transaction ID : SB17.23588
Candidate Name	001 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) C. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 2 E Main St		Amount of Each Disbursement this Period 491.32
City Christiansburg	State VA	
Zip Code 24073	Purpose of Disbursement postage - reimbursed to Raney Quirk 11/24	Transaction ID : SB17.23660
Candidate Name	001 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:		

SUBTOTAL of Disbursements This Page (optional).....	19.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 52		
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Pound Feinstein & Associates		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 1011 E Main Street		Amount of Each Disbursement this Period 17774.57
City Richmond	State VA Zip Code 23219	
Purpose of Disbursement radio advertising	Category/Type 004	Transaction ID : SB17.23471
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. Pound Feinstein & Associates		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 1011 E Main Street		Amount of Each Disbursement this Period 7406.18
City Richmond	State VA Zip Code 23219	
Purpose of Disbursement radio advertising	Category/Type 004	Transaction ID : SB17.23589
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) C. Pound Feinstein & Associates		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 1011 E Main Street		Amount of Each Disbursement this Period 480.00
City Richmond	State VA Zip Code 23219	
Purpose of Disbursement radio advertising	Category/Type 004	Transaction ID : SB17.23598
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:		

SUBTOTAL of Disbursements This Page (optional).....	25660.75
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Raney Quirk		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 1615 Providence Blvd		Amount of Each Disbursement this Period 1824.13 Transaction ID : SB17.23501
City Christiansburg State VA Zip Code 24073	Purpose of Disbursement lodging, meals, office supplies, postage reimbursement Candidate Name Category/Type 001	
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. Raney Quirk		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 1615 Providence Blvd		Amount of Each Disbursement this Period 1339.60 Transaction ID : SB17.23504
City Christiansburg State VA Zip Code 24073	Purpose of Disbursement mileage reimbursement Candidate Name Category/Type 002	
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) c. Raney Quirk		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 1615 Providence Blvd		Amount of Each Disbursement this Period 592.67 Transaction ID : SB17.23505
City Christiansburg State VA Zip Code 24073	Purpose of Disbursement payroll Candidate Name Category/Type 001	
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:	

SUBTOTAL of Disbursements This Page (optional).....	3756.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Raney Quirk		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 1615 Providence Blvd		Amount of Each Disbursement this Period 458.75 Transaction ID : SB17.23597
City Christiansburg State VA Zip Code 24073	Purpose of Disbursement payroll Candidate Name Category/Type 001	
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. Raney Quirk		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014
Mailing Address 1615 Providence Blvd		Amount of Each Disbursement this Period 1995.20 Transaction ID : SB17.23608
City Christiansburg State VA Zip Code 24073	Purpose of Disbursement mileage reimbursement Candidate Name Category/Type 002	
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) c. Raney Quirk		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 1615 Providence Blvd		Amount of Each Disbursement this Period 1781.35 Transaction ID : SB17.23609
City Christiansburg State VA Zip Code 24073	Purpose of Disbursement reimbursement for printing, postage, food Candidate Name Category/Type 001	
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:	

SUBTOTAL of Disbursements This Page (optional).....	4235.30
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Renaissance		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 999 9th St NW		Amount of Each Disbursement this Period 252.23 Transaction ID : SB17.23654
City Washington State DC Zip Code 20001	Purpose of Disbursement lodging Candidate Name Category/Type 002	
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. River City Grill		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 103 Third Ave		Amount of Each Disbursement this Period 1811.58 Transaction ID : SB17.23607
City Radford State VA Zip Code 24141	Purpose of Disbursement catering for election night Candidate Name Category/Type 007	
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) c. Judy Simmons		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 61 Simmons Hollow Rd		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.23349
City Raven State VA Zip Code 24639	Purpose of Disbursement campaign consulting - staff Candidate Name Category/Type 001	
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:	

SUBTOTAL of Disbursements This Page (optional).....	2413.81
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 52			
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Judy Simmons		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 61 Simmons Hollow Rd		Amount of Each Disbursement this Period 230.00 Transaction ID : SB17.23508
City Raven State VA Zip Code 24639	Purpose of Disbursement campaign consulting - staff Candidate Name Category/Type 001	
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. Aaron J. Spradlin		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 1661 Grayson TnPk		Amount of Each Disbursement this Period 1508.00 Transaction ID : SB17.23287
City Wytheville State VA Zip Code 24382	Purpose of Disbursement payroll Candidate Name Category/Type 001	
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) c. Aaron J. Spradlin		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 1661 Grayson TnPk		Amount of Each Disbursement this Period 1143.95 Transaction ID : SB17.23537
City Wytheville State VA Zip Code 24382	Purpose of Disbursement payroll Candidate Name Category/Type 001	
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:	

SUBTOTAL of Disbursements This Page (optional).....	2881.95
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Aaron J. Spradlin		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 1661 Grayson Tnpk		Amount of Each Disbursement this Period 82.14 Transaction ID : SB17.23541
City Wytheville	State VA	
Zip Code 24382	Purpose of Disbursement mileage reimbursement	Category/ Type 002
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. Sarah Sweet		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 422 Front Ave		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.23468
City Salem	State VA	
Zip Code 24153	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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) c. Sarah Sweet		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 422 Front Ave		Amount of Each Disbursement this Period 227.00 Transaction ID : SB17.23494
City Salem	State VA	
Zip Code 24153	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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)	

SUBTOTAL of Disbursements This Page (optional).....	339.14
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sarah Sweet		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 422 Front Ave		Amount of Each Disbursement this Period 145.00 Transaction ID : SB17.23632
City Salem	State VA	
Zip Code 24153	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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. TAL Consulting LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 194 E Hillcrest Dr		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.23289
City Cedar Bluff	State VA	
Zip Code 24609	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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) c. TAL Consulting LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 194 E Hillcrest Dr		Amount of Each Disbursement this Period 1334.00 Transaction ID : SB17.23553
City Cedar Bluff	State VA	
Zip Code 24609	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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:	

SUBTOTAL of Disbursements This Page (optional).....	3479.00
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 49 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Congressional Institute		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2014
Mailing Address 1700 Diagonal Rd #730		Amount of Each Disbursement this Period 1727.00 Transaction ID : SB17.23650
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement registration fees	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address PO Box 105083		Amount of Each Disbursement this Period 666.02 Transaction ID : SB17.23646
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement federal payroll taxes	Category/ Type 001
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) c. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address PO Box 1500		Amount of Each Disbursement this Period 24.00 Transaction ID : SB17.23576
City Richmond	State VA	
Zip Code 23218	Purpose of Disbursement state withholding taxes	Category/ Type 001
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:	

SUBTOTAL of Disbursements This Page (optional).....	2417.02
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mark Wofford		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 522 Litchell Rd		Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.23286
City Salem	State VA	
Zip Code 24153	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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. Mark Wofford		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 522 Litchell Rd		Amount of Each Disbursement this Period 103.60 Transaction ID : SB17.23295
City Salem	State VA	
Zip Code 24153	Purpose of Disbursement mileage reimbursement	Category/ Type 002
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) c. Mark Wofford		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 522 Litchell Rd		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.23296
City Salem	State VA	
Zip Code 24153	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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:	

SUBTOTAL of Disbursements This Page (optional).....	213.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 52	
	<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)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mark Wofford		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 522 Litchell Rd		Amount of Each Disbursement this Period 168.00 Transaction ID : SB17.23536
City Salem	State VA	
Zip Code 24153	Purpose of Disbursement campaign consulting - staff	Category/ Type 001
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. Wordsprint		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address PO Box 544		Amount of Each Disbursement this Period 161.64 Transaction ID : SB17.23346
City Wytheville	State VA	
Zip Code 24382	Purpose of Disbursement printing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

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

SUBTOTAL of Disbursements This Page (optional).....	329.64
TOTAL This Period (last page this line number only).....	125801.49

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 52	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Republican Party of Virginia		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 115 E Grace St		Amount of Each Disbursement this Period 10400.00 Transaction ID : SB21.23470
City Richmond	State VA Zip Code 23219	
Purpose of Disbursement transfer of excess campaign funds	Category/Type 008	
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. UPTON FOR ALL OF US		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address P.O. BOX 490		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.23500
City ST. JOSEPH	State MI Zip Code 49085	
Purpose of Disbursement contribution	Category/Type 011	
Candidate Name FREDERICK STEPHEN UPTON		
Office Sought: <input checked="" 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: MI District: 06		

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

SUBTOTAL of Disbursements This Page (optional).....	12400.00
TOTAL This Period (last page this line number only).....	12400.00