

# 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

|   |   |  |  |
|---|---|--|--|
| <b>1. NAME OF COMMITTEE IN FULL</b><br>Byrne for Congress   |   |  |  |
| <b>ADDRESS</b> (number and street) PO BOX 2743  |   |  |  |
| <b>CITY, STATE, and ZIP CODE</b><br>Mobile AL 36652   |   |  |  |
| <b>2. NAME OF CANDIDATE</b><br>Bradley Roberts Byrne  | <b>3. OFFICE SOUGHT</b> (State and District)<br>House AL 01 | <b>4. FEC IDENTIFICATION NUMBER</b><br>C00545673 |  |
| <b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____ |   |  |  |

  

|   |   |                                       |                   |
|---|---|---------------------------------------|-------------------|
| <b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br>Mr. Clifton C. Inge<br><br>P.O. Box 1354<br><br>Mobile AL 36633-1354                               | Name of Employer<br>IPC Capital<br><br><b>Transaction ID : 61A3C5303EA53463A</b><br>Occupation<br>Managing Director | Date (month, day, year)<br>10/23/2014 | Amount<br>1000.00 |
| <b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br>Mrs. Lisa W. Yearwood<br><br>61 White Avenue<br><br>Fairhope AL 36532-1317                         | Name of Employer<br>Retired<br><br><b>Transaction ID : 641DB3C5929624799</b><br>Occupation<br>Retired               | Date (month, day, year)<br>10/23/2014 | Amount<br>1000.00 |
| <b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br>Mr. W. R. McNair<br><br>P.O. Box 48<br><br>Point Clear AL 36564-0048                               | Name of Employer<br>Retired<br><br><b>Transaction ID : 66CCF7BDDDC8A4C</b><br>Occupation<br>Retired                 | Date (month, day, year)<br>10/23/2014 | Amount<br>1000.00 |
| <b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br>Investment Company Institute PAC<br><br>1401 H Street, N.W., #1200<br><br>Washington DC 20005-2110 | Name of Employer<br><br><b>Transaction ID : 6F72FFF709A61460A</b><br>Occupation                                     | Date (month, day, year)<br>10/23/2014 | Amount<br>1000.00 |
| <b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br>Realtors PAC<br><br>430 North Michigan Avenue<br><br>Chicago IL 60611-4011                         | Name of Employer<br><br><b>Transaction ID : 65D1B538309F54539</b><br>Occupation                                     | Date (month, day, year)<br>10/23/2014 | Amount<br>2000.00 |

  

|   |                           |  |
|---|---------------------------|--|
| <b>SIGNATURE (optional)</b><br>J Ashley Newman<br><br><div style="text-align: center;">[Electronically Filed]</div> | <b>DATE</b><br>10/24/2014 | <b>For further information contact:</b><br>Federal Election Commission<br>999 E Street, NW, Washington, DC 20463<br>Toll Free 800-424-9530, Local 202-694-1100 |
|---|---------------------------|--|

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

## FEC FORM 6

(Revised 07/2011)

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| 1. NAME OF COMMITTEE IN FULL<br><b>Byrne for Congress</b>   |  |   |  | <b>continuation page</b>                                       |
| ADDRESS (number and street) PO BOX 2743   |  |   |  |  |
| CITY, STATE, and ZIP CODE<br>Mobile AL 36652  |  |   |  |  |
| 2. NAME OF CANDIDATE<br>Bradley Roberts Byrne   |  | 3. OFFICE SOUGHT (State and District)<br>House AL 01  |  | 4. FEC IDENTIFICATION NUMBER<br>C00545673                      |
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| A. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><b>Mr. Joel B. Bullard Jr.</b><br><br>P.O. Box 1497<br><br>Point Clear AL 36564-1497                                      |  | Name of Employer<br>Joe Bullard Automotive Group<br><br>Transaction ID : 62939725B740A48DF902<br>Occupation<br>Executive    |  | Date (month, day, year)<br>10/24/2014<br><br>Amount<br>1000.00 |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><b>Mr. Richard J. Brockman</b><br><br>420 North 20th Street<br>Suite 3400<br>Birmingham AL 35203-5210                     |  | Name of Employer<br>Johnston Barton Proctor & Powell<br><br>Transaction ID : 6585B641AFC5F430BBA9<br>Occupation<br>Attorney |  | Date (month, day, year)<br>10/24/2014<br><br>Amount<br>1000.00 |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><b>Mr. H. Taylor Morrisette Jr.</b><br><br>4 Taylor Place<br><br>Mobile AL 36608-2496                                     |  | Name of Employer<br>McCorquodale Transfer, Inc.<br><br>Transaction ID : 641BC2013FE414642819<br>Occupation<br>President     |  | Date (month, day, year)<br>10/24/2014<br><br>Amount<br>1000.00 |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><b>Mr. Scott T. Delaney</b><br><br>486 Winslow Drive<br><br>Mobile AL 36608-2430  |  | Name of Employer<br>Delaney Land and Realty<br><br>Transaction ID : 6B072DFC9B81A4CE9991<br>Occupation<br>Broker            |  | Date (month, day, year)<br>10/24/2014<br><br>Amount<br>1000.00 |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE<br><b>Mrs. Jean Stimpson</b><br><br>65 Oakland Avenue<br><br>Mobile AL 36608-2486  |  | Name of Employer<br>Homemaker<br><br>Transaction ID : 67CD6A2265AF348538B0<br>Occupation<br>Homemaker                       |  | Date (month, day, year)<br>10/24/2014<br><br>Amount<br>1000.00 |

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| <b>4. FEC IDENTIFICATION NUMBER</b><br>C00545673  |  | <i><b>continuation page</b></i>                             |  |
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|  |  |                                       |                   |
|--|--|---------------------------------------|-------------------|
| <b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br>Mr. James H. Frost<br><br>508 Hayfield Place<br><br>Mobile AL 36608-1552                            | Name of Employer<br>Maloney-Frost, LLP<br><br><b>Transaction ID : 6EC94AE4181CD4DEF983</b><br>Occupation<br>Attorney               | Date (month, day, year)<br>10/24/2014 | Amount<br>1000.00 |
| <b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br>Mr. R. L. Tindell Jr.<br><br>400 Austill Place<br><br>Mobile AL 36608-2401                          | Name of Employer<br>Premier Medical Group<br><br><b>Transaction ID : 6FABADE9457884C8596E</b><br>Occupation<br>Ophthalmologist     | Date (month, day, year)<br>10/24/2014 | Amount<br>1000.00 |
| <b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br>Mr. David J. Cooper Sr.<br><br>PO Box 1566<br><br>Mobile AL 36633-1566                              | Name of Employer<br>Cooper/T. Smith Corporation<br><br><b>Transaction ID : 67A19CC2F76004FA5892</b><br>Occupation<br>Vice Chairman | Date (month, day, year)<br>10/24/2014 | Amount<br>1000.00 |
| <b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br>Mr. Harris V. Morrisette<br><br>100 Jacintoport Boulevard<br><br>Saraland AL 36571-3304             | Name of Employer<br>China Doll<br><br><b>Transaction ID : 67728AD0866484E02AD1</b><br>Occupation<br>President                      | Date (month, day, year)<br>10/24/2014 | Amount<br>1000.00 |
| <b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br>American Society of Anesthesiologists PAC<br><br>1061 American Lane<br><br>Schaumburg IL 60173-4973 | Name of Employer<br><br><br><b>Transaction ID : 6C343D2AF6EC54B41BFA</b><br>Occupation   | Date (month, day, year)<br>10/24/2014 | Amount<br>2500.00 |

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| <b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br>National Association of Insurance and Financial Advisors<br>PAC<br>2901 Telestar Court<br><br>Falls Church VA 22042-1260 |  |   |  |
| Name of Employer  |  | Date (month, day, year)<br>10/24/2014                       |  |
| Amount<br>1000.00   |  | <b>Transaction ID : 606ECF97BCE2B4F8E93A</b>                |  |
| Occupation  |  |   |  |
| <b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>   |  |   |  |
| Name of Employer  |  | Date (month, day, year)                                     |  |
| Amount  |  | Occupation  |  |
| Occupation  |  |   |  |
| <b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>   |  |   |  |
| Name of Employer  |  | Date (month, day, year)                                     |  |
| Amount  |  | Occupation  |  |
| Occupation  |  |   |  |
| <b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>   |  |   |  |
| Name of Employer  |  | Date (month, day, year)                                     |  |
| Amount  |  | Occupation  |  |
| Occupation  |  |   |  |
| <b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>   |  |   |  |
| Name of Employer  |  | Date (month, day, year)                                     |  |
| Amount  |  | Occupation  |  |
| Occupation  |  |   |  |