

# 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  
Martha Roby for Congress

ADDRESS (number and street) PO Box 195  
 Check if different than previously reported. (ACC) Montgomery AL 36101

2. **FEC IDENTIFICATION NUMBER** C C00462143 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY STATE ZIP CODE STATE DISTRICT  
AL 02

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 06 / 03 / 2014 in the State of AL  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on   /   /   in the State of  

5. Covering Period 04 / 01 / 2014 through 05 / 14 / 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 Leah Slawson  
Signature of Treasurer Leah Slawson *[Electronically Filed]* Date 05 / 22 / 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.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Martha Roby 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))....	32100.00	778357.31
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	4225.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	32100.00	774132.31
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	47075.53	497063.00
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4376.88
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	47075.53	492686.12
8. Cash on Hand at Close of Reporting Period (from Line 27).....	475898.80	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Martha Roby for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	250.00	304886.32
(ii) Unitemized.....	1350.00	24617.32
(iii) TOTAL of contributions from individuals ▶	1600.00	329503.64
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	30500.00	448853.67
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	32100.00	778357.31
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	31.25
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	4376.88
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	32100.00	782765.44

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	47075.53	497063.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	2225.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	4225.00
21. OTHER DISBURSEMENTS .....	76000.00	75950.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	123075.53	577238.00

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	566874.33
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	32100.00
25. SUBTOTAL (add Line 23 and Line 24).....	598974.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	123075.53
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	475898.80

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

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

FOR LINE NUMBER: PAGE 5 OF 33  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Martha Roby for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Young H Howle**

Mailing Address 78 Lakeside Dr

City State Zip Code  
Eufaula AL 36027-9569

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 01 / 2014

**Transaction ID : ACD2677C78C494CF1B38**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Aaron Grau**

Mailing Address 110 Royalbrooke Dr.

City State Zip Code  
Venetia PA 15367-1392

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 20 / 2014

**Transaction ID : A58454B6FD1144FB6BDB**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 99 Meigs Dr.

City State Zip Code  
Shalimar FL 32579-2145

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 20 / 2014

**Transaction ID : AD652C8DB3B2B470099E**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Martha Roby for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Cohorst**

Mailing Address 650 N Hayden Bay Dr.

City	State	Zip Code
Portland	OR	97217-7966

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

Name of Employer Information Requested	Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 20 / 2014

**Transaction ID : A43580553DADE4F3D87C**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Landon Ash**

Mailing Address 2201 Lane Park Rd

City	State	Zip Code
Mountain Brk	AL	35223-1126

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

Name of Employer Information Requested	Occupation Information Requested
Xtreme Concepts Inc	President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : ADBE97011EBE74A3690B**

Amount of Each Receipt this Period  
-2500.00

Returned Check

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

Mailing Address 202 Oviedo St

City	State	Zip Code
Gulf Breeze	FL	32561-4030

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

Name of Employer Information Requested	Occupation Information Requested
Xtreme Concepts Inc	COO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : A4294C2B9B0724740914**

Amount of Each Receipt this Period  
-2500.00

Returned Check

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

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

-4750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 33
	<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)  
**Martha Roby for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lavera Leonard**

Mailing Address 5856 Colfax Ave.

City: Alexandria State: VA Zip Code: 22311-1014

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

Name of Employer: Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 20 / 2014

**Transaction ID : AAFE664B394134DAA865**

Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jeffrey Shockey**

Mailing Address 10900 Pleasant Hill Dr.

City: Potomac State: MD Zip Code: 20854-1513

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

Name of Employer: Shocker Scofield Solutions Occupation: Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 04 / 20 / 2014

**Transaction ID : ACD2AB6D2401F449498C**

Amount of Each Receipt this Period: 500.00

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

Mailing Address PO Box 550

City: Winfield State: AL Zip Code: 35594-0550

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

Name of Employer: The Citizens Bank Occupation: Community Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 05 / 14 / 2014

**Transaction ID : A4763BD70446D46918EB**

Amount of Each Receipt this Period: 1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Martha Roby for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen Bradley**

Mailing Address 3805 Spring Valley Cir.

City State Zip Code  
Mountain Brk AL 35223-1405

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 20 / 2014

**Transaction ID : A05D7AD6D26314926939**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Nydia Bonnin**

Mailing Address 815 Massachusetts Ave. NE

City State Zip Code  
Washington DC 20002-6015

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 20 / 2014

**Transaction ID : A27F43B41DF9642AEA9E**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Maria Lisa Odle**

Mailing Address 10326 E Pine Valley Dr.

City State Zip Code  
Scottsdale AZ 85255-1700

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 20 / 2014

**Transaction ID : AF265C3D84D1140288A5**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 33
	<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)  
**Martha Roby for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SAWTOOTH POLITICAL ACTION COMMITTEE (SAWTOOTH PAC)**

Mailing Address 61 PINEHURST STREET

City State Zip Code  
Memphis TN 38117-2335

FEC ID number of contributing federal political committee. **C** C00461996

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  
 04 / 20 / 2014

**Transaction ID : A79437C9D8A17456A814**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL JOB CORPS ASSOCIATION YOUTH PAC**

Mailing Address 1023 15TH ST NORTH WEST SUITE 200

City State Zip Code  
Washington DC 20005-2629

FEC ID number of contributing federal political committee. **C** C00550244

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  
 04 / 20 / 2014

**Transaction ID : A4532C9FFA50144C0B75**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**AT&T INC. FEDERAL PAC**

Mailing Address 208 S. Akard Street, Ste 3521

City State Zip Code  
Dallas TX 75202-4206

FEC ID number of contributing federal political committee. **C** C00109017

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  
 05 / 14 / 2014

**Transaction ID : A87C7C4CE96694726B20**

Amount of Each Receipt this Period  
1000.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 33
	<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)  
**Martha Roby for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Corp. Employees PAC**

Mailing Address 2121 Crystal Dr., Ste. 100

City	State	Zip Code
Arlington	VA	22202-3706

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

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 9000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 01 / 2014

**Transaction ID : A6C01F2A26C114DDB939**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MANAGEMENT AND TRAINING CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 10

City	State	Zip Code
Centerville	UT	84014-0010

FEC ID number of contributing federal political committee. **C** C00208322

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  
 04 / 20 / 2014

**Transaction ID : AC7F29204BD2C4C05AE6**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**ALABAMA POWER CO EMPLOYEES FEDERAL PAC**

Mailing Address 600 NORTH 18TH STREET  
PO Box 2641

City	State	Zip Code
Birmingham	AL	35203-2206

FEC ID number of contributing federal political committee. **C** C00077305

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 01 / 2014

**Transaction ID : AFCF2DB38054243C8839**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

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

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

\_\_\_\_\_ 3000.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 33
	<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)  
**Martha Roby for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**The Boeing Co. PAC**

Mailing Address 1200 Wilson Blvd

City State Zip Code  
Arlington VA 22209-2300

FEC ID number of contributing federal political committee. **C C00142711**

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  
 05 / 01 / 2014

**Transaction ID : ABDFA41DFFC06493D8E6**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE**

Mailing Address 100 ABBOTT PARK RD.  
D312 AP6D-2

City State Zip Code  
Abbott Park IL 60064-3502

FEC ID number of contributing federal political committee. **C C00040279**

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  
 04 / 20 / 2014

**Transaction ID : AC135C90A559A4BCDBC2**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND**

Mailing Address 11250 WAPLES MILL ROAD

City State Zip Code  
Fairfax VA 22030-6003

FEC ID number of contributing federal political committee. **C C00053553**

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  
 04 / 20 / 2014

**Transaction ID : A5461105AE3CC4B12B6C**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 33
	<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)  
**Martha Roby for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**REYNOLDS AMERICAN INC. POLITICAL ACTION COMMITTEE; RAI PAC**

Mailing Address P. O. BOX 718

City WINSTON-SALEM State NC Zip Code 27102

FEC ID number of contributing federal political committee. **C** C00042002

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  
 05 / 14 / 2014

**Transaction ID : A7EB62F18063F43B296D**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00147173

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  
 05 / 14 / 2014

**Transaction ID : A2B9470D0EB094D8EA86**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOYBEAN ASSOCIATION PAC (SOYPAC)**

Mailing Address 12125 WOODCREST EXECUTIVE DRIVE  
SUITE 100

City Saint Louis State MO Zip Code 63141-5009

FEC ID number of contributing federal political committee. **C** C00408468

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  
 04 / 20 / 2014

**Transaction ID : A5FA88E0980C147F9B55**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 33
	<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)  
**Martha Roby for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Friends of Jim Saxton**

Mailing Address **PO Box 795**

City **Mount Holly** State **NJ** Zip Code **08080**

FEC ID number of contributing federal political committee. **C C00197699**

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  
**05 / 14 / 2014**

**Transaction ID : A0C2607C1E9004B518DA**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**1000.00**

\_\_\_\_\_

**B.** Full Name (Last, First, Middle Initial)  
**Compass BancPAC**

Mailing Address **PO Box 10566**

City **Birmingham** State **AL** Zip Code **35205**

FEC ID number of contributing federal political committee. **C C00142596**

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  
**04 / 20 / 2014**

**Transaction ID : A7C8BBB3EA47443FB990**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**2000.00**

\_\_\_\_\_

**C.** Full Name (Last, First, Middle Initial)  
**THE WILLIAMS COMPANIES, INC. PAC**

Mailing Address **1627 EYE STREET NW  
SUITE 900**

City **Washington** State **DC** Zip Code **20006-4057**

FEC ID number of contributing federal political committee. **C C00040394**

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  
**05 / 14 / 2014**

**Transaction ID : A5ABF2DA617A249F7B6E**

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 14 OF 33
	<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)  
**Martha Roby for Congress**

**A. RESCARE, INC. ADVOCACY FUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9901 LINN STATION ROAD  
 City Louisville State KY Zip Code 40223-3808  
 FEC ID number of contributing federal political committee. **C C00344663**  
 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  
 04 / 20 / 2014  
**Transaction ID : A8A8FF160D8E24FA5A0F**  
 Amount of Each Receipt this Period  
 1000.00

**B. National Beer Wholesalers Association**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 King Street Ste. 600  
 City Alexandria State VA Zip Code 22314-2965  
 FEC ID number of contributing federal political committee. **C C00144766**  
 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  
 05 / 14 / 2014  
**Transaction ID : AD61AF940431B4BE99FA**  
 Amount of Each Receipt this Period  
 2500.00

**C. Maynard, Cooper & Gale, PC PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1901 6th Ave N 2400 Regions Harbert Plaza  
 City Birmingham State AL Zip Code 35203-4652  
 FEC ID number of contributing federal political committee. **C C00272724**  
 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  
 04 / 20 / 2014  
**Transaction ID : AD0AE18459A5E4F3DA46**  
 Amount of Each Receipt this Period  
 1000.00

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 33
	<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)  
**Martha Roby for Congress**

**A. GENERAL DYNAMICS PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2941 Fairview Park Dr.  
 Suite 100  
 City Falls Church State VA Zip Code 22042-4541  
 FEC ID number of contributing federal political committee. **C C00078451**  
 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  
 05 / 14 / 2014  
**Transaction ID : A4309D0B899B443E3B31**  
 Amount of Each Receipt this Period  
 1000.00  
 3000.00

**B. BALCH AND BINGHAM LLP PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1901 6th Ave N, Ste 1500  
 City Birmingham State AL Zip Code 35203-4642  
 FEC ID number of contributing federal political committee. **C C00358440**  
 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  
 04 / 20 / 2014  
**Transaction ID : A43DC9C3FE2ED403FA55**  
 Amount of Each Receipt this Period  
 500.00  
 5000.00

**C. SUSAN B ANTHONY LIST INC. CANDIDATE FUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1707 L Street, NW  
 Suite 750  
 City Washington State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C C00332296**  
 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  
 05 / 14 / 2014  
**Transaction ID : A7ED1C058985040EE9B3**  
 Amount of Each Receipt this Period  
 2500.00  
 2500.00

**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: PAGE 16 OF 33  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Martha Roby for Congress**

**A. NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1605 KING STREET  
 City State Zip Code  
 ALEXANDRIA VA 22314  
 FEC ID number of contributing federal political committee. **C** C00089458  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2014  
**Transaction ID : AAD0926BD57214642A91**  
 Amount of Each Receipt this Period  
 1000.00

**B. National Chicken Council PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1015 15th St #930  
 City State Zip Code  
 Washington DC 20005  
 FEC ID number of contributing federal political committee. **C** C00034272  
 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 Y  
 05 / 14 / 2014  
**Transaction ID : ABF8D6E5BF7E448F99F0**  
 Amount of Each Receipt this Period  
 1000.00

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

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

2000.00  
 30500.00

**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 17 OF 33			
	<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)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. Professional Data Services, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 01 / 2014</b>
Mailing Address <b>264 N Lumpkin St Ste 202</b>		Amount of Each Disbursement this Period <b>1500.00</b>
City <b>Athens</b>	State <b>GA</b>	Zip Code <b>30601-2832</b>
Purpose of Disbursement <b>Compliance Consulting</b>	Category/Type	
Candidate Name	Transaction ID : <b>BDB2BF46FF5404FD4A08</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Political Ink, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 01 / 2014</b>
Mailing Address <b>1125 Duke St</b>		Amount of Each Disbursement this Period <b>13862.41</b>
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314-3513</b>
Purpose of Disbursement <b>Direct Marketing</b>	Category/Type	
Candidate Name	Transaction ID : <b>B287E3DAFF9D54F91831</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. ServisFirst Bank</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 01 / 2014</b>
Mailing Address <b>PO Box</b>		Amount of Each Disbursement this Period <b>47.55</b>
City <b>Birmingham</b>	State <b>AL</b>	Zip Code <b>35201-0000</b>
Purpose of Disbursement <b>Bank Fees</b>	Category/Type	
Candidate Name	Transaction ID : <b>BCA3F4461B6FC43DA816</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>15409.96</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 33			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. ServisFirst Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box		Amount of Each Disbursement this Period 8.00 <b>Transaction ID : BD93FAAD2C76B4860B46</b>
City Birmingham	State AL	
Zip Code 35201-0000	Purpose of Disbursement Bank Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. The Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 1006 Pendleton St		Amount of Each Disbursement this Period 3144.80 <b>Transaction ID : B5EE85B4D1A764BC6981</b>
City Alexandria	State VA	
Zip Code 22314-1837	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Gateway Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 808 E Utah Valley Dr		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : B9CB1C6CF0AB4414F8DF</b>
City American Fork	State UT	
Zip Code 84003-9707	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3162.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 33			
	<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)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 2735 N Stemmons Fwy		Amount of Each Disbursement this Period 66.00 <b>Transaction ID : B4FE4CEBA2D18408E8EA</b>
City Dallas	State TX	
Zip Code 75207-2211	Purpose of Disbursement Payroll Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Aristotle</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2014
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 88.33 <b>Transaction ID : B2F6494862F374601AEA</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Gateway Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 808 E Utah Valley Dr		Amount of Each Disbursement this Period 2.87 <b>Transaction ID : B4B6CA5148A324B4B842</b>
City American Fork	State UT	
Zip Code 84003-9707	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	157.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 33		
	<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)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 643.57 <b>Transaction ID : BE2CA2CE245714FB5A00</b>
City Washington	State DC Zip Code 20003-1801	
Purpose of Disbursement Meeting Expense	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 2735 N Stemmons Fwy		Amount of Each Disbursement this Period 39.00 <b>Transaction ID : B7B4EA5A0F52D4AADB2B</b>
City Dallas	State TX Zip Code 75207-2211	
Purpose of Disbursement Payroll Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 2735 N Stemmons Fwy		Amount of Each Disbursement this Period 2595.28 <b>Transaction ID : B59F67985D539403188A</b>
City Dallas	State TX Zip Code 75207-2211	
Purpose of Disbursement Payroll Taxes	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3277.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 33		
	<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)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. Professional Data Services, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 264 N Lumpkin St Ste 202		Amount of Each Disbursement this Period 1504.97 <b>Transaction ID : B09B464A9052349D2BFB</b>
City Athens	State GA Zip Code 30601-2832	
Purpose of Disbursement Compliance Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Aristotle</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 2550.00 <b>Transaction ID : BA68C8700ACA045F9A8A</b>
City Washington	State DC Zip Code 20003-1164	
Purpose of Disbursement Software	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Cameron S. Allen</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 1613 Croom Drive		Amount of Each Disbursement this Period 5424.14 <b>Transaction ID : B638A63369E544361BD6</b>
City Montgomery	State AL Zip Code 36106-2623	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9479.11
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 33		
	<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)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. Stephen Seth Morrow</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 1600 S Joyce St Apt 823		Amount of Each Disbursement this Period 772.71 <b>Transaction ID : BB586A79E35E946B98F7</b>
City Arlington	State VA	
Zip Code 22202-5118	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Aristotle</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 2550.00 <b>Transaction ID : B2B338EDCD81042AAAE4</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Software	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. The Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 1006 Pendleton St		Amount of Each Disbursement this Period 6443.51 <b>Transaction ID : B0E07BFCFB7924EDBBA4</b>
City Alexandria	State VA	
Zip Code 22314-1837	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9766.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 33		
	<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)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cincinnati Insurance Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address PO Box 145496		Amount of Each Disbursement this Period 120.00 <b>Transaction ID : B1007233CE4E9406C9CD</b>
City Cincinnati	State OH	
Zip Code 45250-5496	Purpose of Disbursement Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ServisFirst Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address PO Box		Amount of Each Disbursement this Period 45.21 <b>Transaction ID : B58CCC3B561844BDFAB0</b>
City Birmingham	State AL	
Zip Code 35201-0000	Purpose of Disbursement Bank Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Gateway Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 808 E Utah Valley Dr		Amount of Each Disbursement this Period 10.20 <b>Transaction ID : B1637004961D044B5923</b>
City American Fork	State UT	
Zip Code 84003-9707	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	175.41
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 33			
	<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)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 2735 N Stemmons Fwy		Amount of Each Disbursement this Period 70.00
City Dallas	State TX	
Zip Code 75207-2211	Purpose of Disbursement Payroll Fees	Transaction ID : B6E354D82D5E24336B01
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ServisFirst Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address PO Box		Amount of Each Disbursement this Period 2668.24
City Birmingham	State AL	
Zip Code 35201-0000	Purpose of Disbursement See Memo Entries	Transaction ID : BF9D18C46298D44E291F
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RT's Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 3804 Mt Vernon Ave		Amount of Each Disbursement this Period 725.82
City Alexandria	State VA	
Zip Code 22305-2409	Purpose of Disbursement Meeting Expense	Transaction ID : BEB5B9AF74D9E4DDCAA2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2738.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 33			
	<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)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 13.36
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Shipping	Category/Type	Transaction ID : <b>BF7A14DF25619465D8A0</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Congressional Institute</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 1700 Diagonal Rd Ste 730		Amount of Each Disbursement this Period 890.00
City Alexandria	State VA Zip Code 22314-2843	
Purpose of Disbursement Conference Fees	Category/Type	Transaction ID : <b>B73195D31A2CA446FA46</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. ServisFirst Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address PO Box		Amount of Each Disbursement this Period 46.79
City Birmingham	State AL Zip Code 35201-0000	
Purpose of Disbursement Bank Fees	Category/Type	Transaction ID : <b>B2B009BA814884184914</b>
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)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 33	
	<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)  
**Martha Roby for Congress**

**A. T-Mobile**

Full Name (Last, First, Middle Initial)

Mailing Address 12920 SE 38th St

City Bellevue State WA Zip Code 98006-1350

Purpose of Disbursement Telephone  
Candidate Name

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

State: District:

Date of Disbursement: 04 / 02 / 2014

Amount of Each Disbursement this Period: 301.29

Transaction ID : B4B9ECD2CEE8D422784B

[MEMO ITEM]

**B. US Airways**

Full Name (Last, First, Middle Initial)

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement Travel Expense  
Candidate Name

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

State: District:

Date of Disbursement: 04 / 02 / 2014

Amount of Each Disbursement this Period: 576.50

Transaction ID : B2009CEB194AB43D58F2

[MEMO ITEM]

**c. ServisFirst Bank**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box

City Birmingham State AL Zip Code 35201-0000

Purpose of Disbursement See Memo Entries  
Candidate Name

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

State: District:

Date of Disbursement: 05 / 14 / 2014

Amount of Each Disbursement this Period: 433.87

Transaction ID : B42924C573FC64078963

**SUBTOTAL** of Disbursements This Page (optional) ..... 433.87

**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 27 OF 33			
	<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)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2014
Mailing Address 475 Lenfant Plz SW		Amount of Each Disbursement this Period 19.99
City Washington	State DC	
Zip Code 20260-0001	Purpose of Disbursement Postage	Transaction ID : <b>BF631A4B9AA314F51933</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SmartStop Self Storage</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2014
Mailing Address 6855 Vaughn Rd		Amount of Each Disbursement this Period 106.00
City Montgomery	State AL	
Zip Code 36116-1328	Purpose of Disbursement Storage Facility Rental	Transaction ID : <b>B283F593D4BAD4804816</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2014
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 20.67
City Atlanta	State GA	
Zip Code 30328-3474	Purpose of Disbursement Shipping	Transaction ID : <b>BB8F66839856B4E26AE6</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 33		
	<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)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 133 Calkins Rd		Amount of Each Disbursement this Period 262.13
City Rochester	State NY	
Zip Code 14623-4207	Purpose of Disbursement Telephone	Transaction ID : <b>B9162CE5E2622440B91</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Knology Business Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 2660 Montgomery Hwy		Amount of Each Disbursement this Period 25.08
City Dothan	State AL	
Zip Code 36303-2618	Purpose of Disbursement Internet	Transaction ID : <b>B4481CBDC3B9F4A65982</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Stephen Boyd</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 1100 First Street SE Apt 816		Amount of Each Disbursement this Period 261.90
City Washington	State DC	
Zip Code 20003-4719	Purpose of Disbursement See Memo Entry	Transaction ID : <b>B2B798598026442D1B48</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	261.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 33	
	<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)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. Medium Rare</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 515 8th St SE		Amount of Each Disbursement this Period 261.90
City Washington	State DC	
Zip Code 20003-2835	Purpose of Disbursement Meeting Expense	Transaction ID : B9498E2EAE23B4FF3BEB
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Stephen Seth Morrow</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1600 S Joyce St Apt 823		Amount of Each Disbursement this Period 35.00
City Arlington	State VA	
Zip Code 22202-5118	Purpose of Disbursement Travel Expense No Itemization Necessary	Transaction ID : B749D1EE719A3452CB57
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. ServisFirst Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address PO Box		Amount of Each Disbursement this Period 2158.61
City Birmingham	State AL	
Zip Code 35201-0000	Purpose of Disbursement See Memo Entries	Transaction ID : BC9AD978BFFFD49AFA3A
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2193.61
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 33			
	<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)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. SmartStop Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 6855 Vaughn Rd		Amount of Each Disbursement this Period 464.20
City Montgomery	State AL	
Zip Code 36116-1328	Purpose of Disbursement Storage Facility Rental	[MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Knology Business Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 2660 Montgomery Hwy		Amount of Each Disbursement this Period 41.44
City Dothan	State AL	
Zip Code 36303-2618	Purpose of Disbursement Internet	[MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 1601 S California Ave		Amount of Each Disbursement this Period 100.00
City Palo Alto	State CA	
Zip Code 94304-1111	Purpose of Disbursement Advertising	[MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 33			
	<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)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. Concierge Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 1829 W 2nd St		Amount of Each Disbursement this Period 480.00
City Montgomery	State AL	
Zip Code 36106-1503	Purpose of Disbursement Transportation	Transaction ID : B75F239F14E6B462B87F
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 6600 N Military Trl		Amount of Each Disbursement this Period 98.62
City Boca Raton	State FL	
Zip Code 33496-2434	Purpose of Disbursement Office Supplies	Transaction ID : BEC42998894534E68A62
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 475 Lenfant Plz SW		Amount of Each Disbursement this Period 61.90
City Washington	State DC	
Zip Code 20260-0001	Purpose of Disbursement Postage	Transaction ID : B532DDE13ED144D3B85D
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 33	
	<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)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 104.30
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Shipping	Category/Type	Transaction ID : <b>BF064D7CF3B5B4ECDBAO</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 133 Calkins Rd		Amount of Each Disbursement this Period 661.70
City Rochester	State NY Zip Code 14623-4207	
Purpose of Disbursement Telephone	Category/Type	Transaction ID : <b>B85C53605073A451AABE</b>
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. ServisFirst Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address PO Box		Amount of Each Disbursement this Period 25.45
City Birmingham	State AL Zip Code 35201-0000	
Purpose of Disbursement Bank Fees	Category/Type	Transaction ID : <b>BAF21DFF80233473DBBF</b>
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)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	47056.17

**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 33	
	<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)  
**Martha Roby for Congress**

Full Name (Last, First, Middle Initial) <b>A. National Republican Congressional Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 09 / 2014</b>
Mailing Address <b>320 1st St SE</b>		Amount of Each Disbursement this Period <b>75000.00</b> Transaction ID : <b>B84DEEABC954842D88F1</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-1838</b>	Purpose of Disbursement Contribution	
Candidate Name <b>National Republican Congressional Committee</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Reese McKinney for Secretary of State</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 11 / 2014</b>
Mailing Address <b>PO Box 36111</b>		Amount of Each Disbursement this Period <b>1000.00</b> Transaction ID : <b>B4BE0B84331AC49208BD</b>
City <b>Montgomery</b> State <b>AL</b> Zip Code <b>36111</b>	Purpose of Disbursement Contribution (State/Local Committee)	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>76000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>76000.00</b>