

# 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

Friends of Dave Brat Inc.

ADDRESS (number and street)

PO Box 5094

Check if different than previously reported. (ACC)

Glen Allen

VA

23058

2. FEC IDENTIFICATION NUMBER ▼

C C00554949

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

VA

07

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:

- 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 Debbie Agliano

Signature of Treasurer Debbie Agliano

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
12 / 30 / 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  
**Friends of Dave Brat Inc.**

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))....	142734.17	1455792.88
(b) Total Contribution Refunds (from Line 20(d)) .....	964	2514
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	141770.17	1453278.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	436527.84	1302889.41
(b) Total Offsets to Operating Expenditures (from Line 14).....	44.98	3089.72
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	436482.86	1299799.69
8. Cash on Hand at Close of Reporting Period (from Line 27).....	91561.38	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....		

**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

FEC Form 3 (Revised 07/05)

- 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

Friends of Dave Brat Inc.

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

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2014"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2014"/> (date after general election)  through <input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="78419.18"/>	<input type="text" value="786165.72"/>	<input type="text" value="250"/>
(ii) Unitemized		
<input type="text" value="43199.6"/>	<input type="text" value="471926.71"/>	<input type="text" value="285"/>
(iii) Total of contributions from individuals		
<input type="text" value="121618.78"/>	<input type="text" value="1258092.43"/>	<input type="text" value="535"/>
(b) Political Party Committees		
<input type="text" value=""/>	<input type="text" value="15000"/>	<input type="text" value=""/>
(c) Other Political Committees		
<input type="text" value="21115.39"/>	<input type="text" value="181625.45"/>	<input type="text" value=""/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 152

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		
	1075	
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
142734.17	1455792.88	535
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
(b) All Other Loans		
(c) TOTAL LOANS (add Lines 13(a) and (b))		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
44.98	3089.72	
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
142779.15	1458882.6	535

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

Friends of Dave Brat Inc.

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

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)
<b>17. OPERATING EXPENDITURES</b>		
436527.84	1302889.41	62452.81
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
964	2514	
(b) Political Party Committees		

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 152

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)

--	--	--

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

964	2514	
-----	------	--

**21. OTHER DISBURSEMENTS**

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

437491.84	1305403.41	62452.81
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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))

141770.17	1453278.88	
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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)

436482.86	1299799.69	
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	386274.07
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	142779.15
25. SUBTOTAL (add Line 23 and Line 24).....	529053.22
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	437491.84
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	91561.38

**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 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Faye B Andrews**

Mailing Address PO Box 143

City Normangee State TX Zip Code 77871

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

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

**Transaction ID : SA11Ai-CN13634**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Stephen Earl Baril**

Mailing Address 4103 Sulgrave Road

City Richmond State VA Zip Code 23221

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

Name of Employer KVCF Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : SA11Ai-CN14277**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr Christopher Barnekov**

Mailing Address 1925 Saint Joe Center Rd

City Fort Wayne State IN Zip Code 46825

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 **225**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 16 / 2014

**Transaction ID : SA11Ai-CN11758**

Amount of Each Receipt this Period  
**25**

TrnsRef: 86090451 CustRef: 14967975

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

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

**2875.00**

**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 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Christopher Barnekov**

Mailing Address 1925 Saint Joe Center Rd

City Fort Wayne State IN Zip Code 46825

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : SA11Ai-CN14917**

Amount of Each Receipt this Period  
**25**

**B.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City Alexandria State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **80958**

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

**Transaction ID : SA11C-CN15550**

Amount of Each Receipt this Period  
**25**

Earmarked-Christopher Barnekov

**[MEMO ITEM]**  
 Total earmarked through conduit. PAC limit not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Beverly Estes Bates**

Mailing Address 3 Highland Road

City Henrico State VA Zip Code 23229

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2014

**Transaction ID : SA11Ai-CN15204**

Amount of Each Receipt this Period  
**500**

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

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

**525.00**



**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 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John Wythe Bates III**

Mailing Address 3 Highland Road

City State Zip Code  
Henrico VA 23229

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		01		2014

**Transaction ID : SA11Ai-CN15203**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Bruce Becker**

Mailing Address 5363 Balboa Blvd  
Apt 246

City State Zip Code  
Encino CA 91316

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

Name of Employer Occupation  
Self physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**210**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		20		2014

**Transaction ID : SA11Ai-CN12762**

Amount of Each Receipt this Period  
**10**

TrnsRef: 86316457 CustRef: 15518841

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Bruce Becker**

Mailing Address 5363 Balboa Blvd  
Apt 246

City State Zip Code  
Encino CA 91316

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

Name of Employer Occupation  
Self physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**260**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		20		2014

**Transaction ID : SA11Ai-CN12763**

Amount of Each Receipt this Period  
**50**

TrnsRef: 86316485 CustRef: 15518841

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

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

**560.00**

**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 152
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Mr. Matthew Daniel Benka</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 03 / 2014	
Mailing Address 8901 River Rd		<b>Transaction ID : SA11Ai-CN15253</b>	
City State Zip Code Henrico VA 23229	Amount of Each Receipt this Period _____ 250		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation MDB Strategies President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250		

Full Name (Last, First, Middle Initial) <b>B. Mr. Raymond T Beurket Jr</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address 6515 Gretna Green Way		<b>Transaction ID : SA11Ai-CN13099</b>	
City State Zip Code Alexandria VA 22312	Amount of Each Receipt this Period _____ 50		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation USG Colonel		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 525		

Full Name (Last, First, Middle Initial) <b>C. Mr. Raymond T Beurket Jr</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 6515 Gretna Green Way		<b>Transaction ID : SA11Ai-CN13746</b>	
City State Zip Code Alexandria VA 22312	Amount of Each Receipt this Period _____ 25		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation USG Colonel		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 550		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 325.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Eric Marcel Bierhuizen**

Mailing Address 109 Scanlon Street W

City State Zip Code  
Culpeper VA 22701

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

Name of Employer Occupation  
JetBlue Airways Pilot

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

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

**Transaction ID : SA11Ai-CN13096**

Amount of Each Receipt this Period  
**100**

TrnsRef: 86357291 CustRef: 15523613

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Irene Painter Bishop**

Mailing Address 109 Beverly Road

City State Zip Code  
Ashland VA 23005

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2150**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2014

**Transaction ID : SA11Ai-CN12657**

Amount of Each Receipt this Period  
**150**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs Janet Bonillo**

Mailing Address 16000 Carrington Ct

City State Zip Code  
Mineral VA 23117

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  
**595**

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

**Transaction ID : SA11Ai-CN13802**

Amount of Each Receipt this Period  
**5**

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

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

**255.00**

**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 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address **PO Box 388**

City **Alexandria** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **76022**

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

**Transaction ID : SA11C-CN14416**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **5**

Earmarked contribution-Janet Bonillo

**[MEMO ITEM]**  
 Total earmarked through conduit. PAC limit not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Louis Maurice Bosse Jr.**

Mailing Address **15391 Henry Forest Way**

City **Montpelier** State **VA** Zip Code **23192**

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

Name of Employer Occupation  
**KnowWho Inc. Software Engineer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225**

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

**Transaction ID : SA11Ai-CN12711**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **125**

TrnsRef: 86305037 CustRef: 15516365

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Andrew Beverly Brabrand**

Mailing Address **15366 Brabrand Ln**

City **Montpelier** State **VA** Zip Code **23192**

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

Name of Employer Occupation  
**None Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

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

**Transaction ID : SA11Ai-CN13687**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **250**

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

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

\_\_\_\_\_ **375.00**

\_\_\_\_\_

**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 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas Milton Branin**

Mailing Address 8402 Michaels Rd

City Henrico State VA Zip Code 23229

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

Name of Employer Henrico Co Occupation Planning Commission

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11Ai-CN14800**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Ross Edward Brown**

Mailing Address 10414 Dakins Dr

City N Chestefield State VA Zip Code 23236

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 **1938**

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

**Transaction ID : SA11Ai-CN13736**

Amount of Each Receipt this Period  
**201**

**C.** Full Name (Last, First, Middle Initial)  
**Mr Daniel Brubaker**

Mailing Address 13096 Milltown Rd

City Lovettsville State VA Zip Code 20180

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

Name of Employer None Occupation Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

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

**Transaction ID : SA11Ai-CN12704**

Amount of Each Receipt this Period  
**200**

TrnsRef: 86271793 CustRef: 15513901

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

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

**651.00**

**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 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Joan Pruitt Buhrman**

Mailing Address 8915 Tresco Road

City State Zip Code  
Henrico VA 23229

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1200**

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

**Transaction ID : SA11Ai-CN13651**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. William Joseph Buhrman**

Mailing Address 8915 Tresco Road

City State Zip Code  
Henrico VA 23229

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

Name of Employer Occupation  
Requested Best Efforts

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

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

**Transaction ID : SA11Ai-CN15856**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr Albert Burgstahler**

Mailing Address 3913 Shelley Ln

City State Zip Code  
Annandale VA 22003

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

Name of Employer Occupation  
TRIDENT SYSTEMS INC. ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**275**

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

**Transaction ID : SA11Ai-CN14936**

Amount of Each Receipt this Period  
**25**

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

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

**2025.00**

**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 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address **PO Box 388**

City **Alexandria** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**80958**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		28		2014

**Transaction ID : SA11C-CN15572**

Amount of Each Receipt this Period  
**25**

Earmarked-Albert Burgstahler

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Daniel Brent Butler**

Mailing Address **9905 Alf Ct**

City **Glen Allen** State **VA** Zip Code **23060**

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

Name of Employer Occupation  
**McKesson Medical Surgical Health Care**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**295**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		01		2014

**Transaction ID : SA11Ai-CN15220**

Amount of Each Receipt this Period  
**10**

**C.** Full Name (Last, First, Middle Initial)  
**Mr Earl Caldwell**

Mailing Address **172 N Plaza Ct**

City **Mt Pleasant** State **SC** Zip Code **29464**

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

Name of Employer Occupation  
**APR CFO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		17		2014

**Transaction ID : SA11Ai-CN12790**

Amount of Each Receipt this Period  
**100**

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

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

**110.00**

**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 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address **PO Box 388**

City **Alexandria** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**63496**

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

**Transaction ID : SA11C-CN12977**

Amount of Each Receipt this Period

Earmarked contribution-Earl Caldwell

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jonathan Calesnick**

Mailing Address **800 4th St. SW # N216**

City **Washington** State **DC** Zip Code **20024**

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

Name of Employer Occupation  
**U.S. House of Representatives Chamber Liaison**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**275**

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

**Transaction ID : SA11Ai-CN14837**

Amount of Each Receipt this Period

TrnsRef: 86898821 CustRef: 15181239

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Johnny Bainbridge Cates**

Mailing Address **513 Sinton Rd**

City **Richmond** State **VA** Zip Code **23229**

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

Name of Employer Occupation  
**Land Rover Richmond Retail**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 16 / 2014**

**Transaction ID : SA11Ai-CN11783**

Amount of Each Receipt this Period

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

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Brian Chatwin**

Mailing Address 6608 Independence Ave

City Springfield State VA Zip Code 22151

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : SA11Ai-CN13559**

Amount of Each Receipt this Period  
**250**

TrnsRef: 86391755 CustRef: 15528909

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Porter E Childers**

Mailing Address 10307 Mountington Ct

City Vienna State VA Zip Code 22182

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **320**

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

**Transaction ID : SA11Ai-CN13117**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jason M Chung**

Mailing Address 2717 Valestea Cir

City Oakton State VA Zip Code 22124

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

Name of Employer RNC Occupation Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11Ai-CN14802**

Amount of Each Receipt this Period  
**250**

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

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

**600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Bernard Cieplak**

Mailing Address 12419 Deer Ridge Rd

City State Zip Code  
Culpeper VA 22701

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

Name of Employer Occupation  
US Dept Of Education Program Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

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

**Transaction ID : SA11Ai-CN14839**

Amount of Each Receipt this Period  
**300**

**B.** Full Name (Last, First, Middle Initial)  
**Mr Raymond Claflin**

Mailing Address 122 Morningside St

City State Zip Code  
Leominster MA 01453

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

Name of Employer Occupation  
CAI Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**310**

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 02 / 2014

**Transaction ID : SA11Ai-CN15243**

Amount of Each Receipt this Period  
**10**

TrnsRef: 87004101 CustRef: 15594875

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John Cline**

Mailing Address 8 Ranger Trl

City State Zip Code  
Sparta NJ 07871

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

Name of Employer Occupation  
US Army Project Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**225**

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

**Transaction ID : SA11Ai-CN13656**

Amount of Each Receipt this Period  
**75**

TrnsRef: 86571711 CustRef: 15023533

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

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

**385.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Julianne Szyper Condrey**

Mailing Address 14095 Spring Creek Ln

City State Zip Code  
Doswell VA 23047

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

Name of Employer Occupation  
Self consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		29		2014

**Transaction ID : SA11Ai-CN14419**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Henry William Coogan III**

Mailing Address 2742 Live Oak Lane

City State Zip Code  
Midlothian VA 23113

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

Name of Employer Occupation  
Firstmark Corp Businessman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**850**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		23		2014

**Transaction ID : SA11Ai-CN13583**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Barbara Tyler Cook**

Mailing Address 10341 Pollard Creek Road

City State Zip Code  
Mechanicsville VA 23116

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**225**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		21		2014

**Transaction ID : SA11Ai-CN13111**

Amount of Each Receipt this Period  
**125**

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

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

**425.00**

**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 152
	<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)  
**Friends of Dave Brat Inc.**

**A. Ms Dena Cottle**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3612 Starlighter Dr  
 City Virginia Beach State VA Zip Code 23452  
 FEC ID number of contributing federal political committee. C  
 Name of Employer CVB Occupation SYSTEMS ANALYST  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 206

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2014  
**Transaction ID : SA11Ai-CN12804**  
 Amount of Each Receipt this Period  
 5

**B. Senate Conservatives Fund**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 388  
 City Alexandria State VA Zip Code 22313  
 FEC ID number of contributing federal political committee. C C00448696  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 64921

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2014  
**Transaction ID : SA11C-CN12991**  
 Amount of Each Receipt this Period  
 5  
 Earmarked contribution-Dena Cottle  
**[MEMO ITEM]**  
 Total earmarked through conduit. PAC limit not affected.

**C. Mrs. Dorothy Compton Cox**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13407 Blanton Road  
 City Ashland State VA Zip Code 23005  
 FEC ID number of contributing federal political committee. C  
 Name of Employer None Occupation Homemaker  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 2600

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2014  
**Transaction ID : SA11Ai-CN15396**  
 Amount of Each Receipt this Period  
 2600  
 Event Catering  
 In-Kind Received Event Catering

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

2605.00

**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 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Dorothy Compton Cox**

Mailing Address 13407 Blanton Road

City Ashland State VA Zip Code 23005

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify) Special General 2014

Election Cycle-to-Date **3347.56**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2014**

**Transaction ID : SA11Ai-CN15397**

Amount of Each Receipt this Period  
**747.56**

Event Catering

In-Kind Received Event Catering

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John Alfred Cox**

Mailing Address 13407 Blanton Rd

City Ashland State VA Zip Code 23005

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2014**

**Transaction ID : SA11Ai-CN15394**

Amount of Each Receipt this Period  
**2500**

Event Catering

In-Kind Received Event Catering

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John Alfred Cox**

Mailing Address 13407 Blanton Rd

City Ashland State VA Zip Code 23005

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) Special General 2014

Election Cycle-to-Date **4447.56**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2014**

**Transaction ID : SA11Ai-CN15395**

Amount of Each Receipt this Period  
**847.56**

Event Catering

In-Kind Received Event Catering

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

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

**4095.12**

**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 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Thomas Crabtree**

Mailing Address 7859 Twin Ridge Dr

City State Zip Code  
Glen Burnie MD 21061

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  
**546**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		18		2014

**Transaction ID : SA11Ai-CN12805**

Amount of Each Receipt this Period  
**21**

**B.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City State Zip Code  
Alexandria VA 22313

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**64921**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		18		2014

**Transaction ID : SA11C-CN12992**

Amount of Each Receipt this Period  
**21**

Earmarked contribution-Thomas Crabtree

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Douglas Weeks Crosby**

Mailing Address 9226 Ivy Banks Drive

City State Zip Code  
Mechanicsville VA 23116

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

Name of Employer Occupation  
Earnest & Associates Account Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**225**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		22		2014

**Transaction ID : SA11Ai-CN13542**

Amount of Each Receipt this Period  
**125**

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

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

**146.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Kathleen Culmer**

Mailing Address 6404 Cooper PI

City State Zip Code  
Plano TX 75093

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350**

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

**Transaction ID : SA11Ai-CN13854**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City State Zip Code  
Alexandria VA 22313

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**72501**

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

**Transaction ID : SA11C-CN14368**

Amount of Each Receipt this Period  
**100**

Earmarked contribution-Kathleen Culmer

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Steven D'Ambrosia**

Mailing Address 401 Lynchell Place

City State Zip Code  
Henrico VA 23238

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

Name of Employer Occupation  
Altria CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11Ai-CN14835**

Amount of Each Receipt this Period  
**100**

TrnsRef: 86890805 CustRef: 15580087

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

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

**200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Jeannemarie D Davis**

Mailing Address 2213 Aryness Dr

City Vienna State VA Zip Code 22181

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 30 / 2014**

**Transaction ID : SA11Ai-CN14804**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Jeannemarie D Davis**

Mailing Address 2213 Aryness Dr

City Vienna State VA Zip Code 22181

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1747.13**

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

**Transaction ID : SA11Ai-CN15419**

Amount of Each Receipt this Period  
**747.13**

Event Catering  
 In-Kind Received Event Catering

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Harold Vando Dellinger II**

Mailing Address 14270 Country Club Drive

City Ashland State VA Zip Code 23005

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

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

**Transaction ID : SA11Ai-CN13577**

Amount of Each Receipt this Period  
**750**

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

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

**2497.13**



**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 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James Derderian**

Mailing Address 4720 32nd St N

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Stanton Park Group LLC Managing Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 03 / 2014

**Transaction ID : SA11Ai-CN15247**

Amount of Each Receipt this Period  
250

TrnsRef: 87009357 CustRef: 15595595

**B.** Full Name (Last, First, Middle Initial)  
**Mr Edwin Devilbiss**

Mailing Address 38 Spartina Point Dr

City State Zip Code  
Hilton Head SC 29926

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

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

**Transaction ID : SA11Ai-CN13869**

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City State Zip Code  
Alexandria VA 22313

FEC ID number of contributing federal political committee. **C** C00448696

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
71631

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

**Transaction ID : SA11C-CN14383**

Amount of Each Receipt this Period  
500

Earmarked contribution-Edwin Devilbiss

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**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 26 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Edwin Devilbiss**

Mailing Address 38 Spartina Point Dr

City State Zip Code  
Hilton Head SC 29926

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  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 30 2014**

**Transaction ID : SA11Ai-CN15201**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr Stephen Dewey**

Mailing Address 1200 N Veitch St Apt 815

City State Zip Code  
Arlington VA 22201

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

Name of Employer Occupation  
FDIC RESOLUTION SPECIALIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 19 2014**

**Transaction ID : SA11Ai-CN13870**

Amount of Each Receipt this Period  
**300**

**C.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City State Zip Code  
Alexandria VA 22313

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**66685**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 19 2014**

**Transaction ID : SA11C-CN14384**

Amount of Each Receipt this Period  
**300**

Earmarked contribution-Stephen Dewey

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**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 27 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Judith Kichman Digon**

Mailing Address 5424 Christian Field Drive

City Mechanicsville	State VA	Zip Code 23111
------------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		20		2014

**Transaction ID : SA11Ai-CN12693**

Amount of Each Receipt this Period  
**50**

TrnsRef: 86257905 CustRef: 15512191

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Judith Kichman Digon**

Mailing Address 5424 Christian Field Drive

City Mechanicsville	State VA	Zip Code 23111
------------------------	-------------	-------------------

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  
**275**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		01		2014

**Transaction ID : SA11Ai-CN15210**

Amount of Each Receipt this Period  
**25**

TrnsRef: 86966649 CustRef: 15512191

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Douglas Domenech**

Mailing Address 405 Saint Asaph St N

City Alexandria	State VA	Zip Code 22134
--------------------	-------------	-------------------

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

Name of Employer Self	Occupation Consultant
--------------------------	--------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**650**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		23		2014

**Transaction ID : SA11Ai-CN13572**

Amount of Each Receipt this Period  
**150**

TrnsRef: 86467809 CustRef: 15332109

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

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

**225.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr James B Downey**

Mailing Address 26000 New Bridge Dr

City Los Altos Hills State CA Zip Code 94022

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

Name of Employer **ALTOS SONOMA CORP** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600**

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

**Transaction ID : SA11Ai-CN13647**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Club For Growth PAC**

Mailing Address 2001 L ST NW SUITE 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00432260**

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 / 24 / 2014**

**Transaction ID : SA11C-CN13648**

Amount of Each Receipt this Period  
**200**

Earmarked contribution-James Downey

**[MEMO ITEM]**  
 Total earmarked through conduit. PAC limit not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Mr James B Downey**

Mailing Address 26000 New Bridge Dr

City Los Altos Hills State CA Zip Code 94022

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

Name of Employer **ALTOS SONOMA CORP** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850**

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

**Transaction ID : SA11Ai-CN14969**

Amount of Each Receipt this Period  
**250**

**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 29 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address **PO Box 388**

City **Alexandria** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**84358**

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

**Transaction ID : SA11C-CN15606**

Amount of Each Receipt this Period

Earmarked contribution-James Downey

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Hon. C Dale Duvall**

Mailing Address **7487 James Monroe Highway**

City **Culpeper** State **VA** Zip Code **22701**

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

Name of Employer Occupation  
**None Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**850**

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

**Transaction ID : SA11Ai-CN13115**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Herbert Jackson Dyer Jr.**

Mailing Address **12470 Newfound Falls Lane**

City **Doswell** State **VA** Zip Code **23047**

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

Name of Employer Occupation  
**Gulf Seaboard General Contractors President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**325**

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

**Transaction ID : SA11Ai-CN13580**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Donna Holt Elmore**

Mailing Address 2808 Glen Gary Place

City State Zip Code  
Henrico VA 23233

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

Name of Employer Occupation  
Underground Services First Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**210**

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

**Transaction ID : SA11Ai-CN14848**

Amount of Each Receipt this Period  
**10**

TrnsRef: 86948285 CustRef: 15576091

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Kenneth G Elzinga**

Mailing Address PO Box 400182

City State Zip Code  
Charlottesville VA 22904

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

Name of Employer Occupation  
UVA Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 16 / 2014**

**Transaction ID : SA11Ai-CN12698**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Judith Enfield**

Mailing Address 4227 Nancy Pl

City State Zip Code  
Shoreview MN 55126

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

Name of Employer Occupation  
VALERELLC PROGRAMMER ANALYST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**525**

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

**Transaction ID : SA11Ai-CN13661**

Amount of Each Receipt this Period  
**35**

TrnsRef: 86580145 CustRef: 14859289

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

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

**545.00**

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

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

FOR LINE NUMBER: PAGE 31 OF 152  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Brat Inc.**

A. Full Name (Last, First, Middle Initial)  
**Mr. Robey Webb Estes Jr.**  
 Mailing Address 2220 Cardiff Way  
 City State Zip Code  
 North Chesterfield VA 23236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Estes Express CEO  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 27 2014**  
**Transaction ID : SA11Ai-CN13710**  
 Amount of Each Receipt this Period  
**250**

B. Full Name (Last, First, Middle Initial)  
**Mr. Jeffrey Ferrill**  
 Mailing Address 2225 Blue Ridge Ln  
 City State Zip Code  
 Charlottesville VA 22901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Strathmoore Co Inc RE MNMNT/INVMNTS  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 20 2014**  
**Transaction ID : SA11Ai-CN12702**  
 Amount of Each Receipt this Period  
**500**  
 TrnsRef: 86264453 CustRef: 15512877

C. Full Name (Last, First, Middle Initial)  
**Mr. Keith S Fimian**  
 Mailing Address 3650 Concord Pkwy  
 City State Zip Code  
 Chantilly VA 20151  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 US Inspect LLC Chairman  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 30 2014**  
**Transaction ID : SA11Ai-CN14803**  
 Amount of Each Receipt this Period  
**1000**

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

**1750.00**

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

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

FOR LINE NUMBER: PAGE 32 OF 152  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Lt Col William H Follmer**

Mailing Address 99-1647 Aiea Heights Drive

City Aiea State HI Zip Code 96701

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **435**

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

**Transaction ID : SA11Ai-CN13721**

Amount of Each Receipt this Period  
 100

TrnsRef: 86673337 CustRef: 15307017

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Hyland Franklin Fowler Jr.**

Mailing Address 12369 Traylor Springs Ln

City Ashland State VA Zip Code 23005

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

Name of Employer State Of Virginia Occupation House Of Delegates 55th District

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11Ai-CN14828**

Amount of Each Receipt this Period  
 250

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gregory Fraser**

Mailing Address 46 Prospect Hill Rd

City Lexington State MA Zip Code 02421

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

Name of Employer GRT Capital Partners LLC Occupation Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

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

**Transaction ID : SA11Ai-CN12755**

Amount of Each Receipt this Period  
 300

TrnsRef: 86309231 CustRef: 15517275

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

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

650.00



**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 33 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. David J French**

Mailing Address **W303N2568 Maple Ave**

City <b>Pewaukee</b>	State <b>WI</b>	Zip Code <b>53072</b>
-------------------------	--------------------	--------------------------

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

Name of Employer <b>None</b>	Occupation <b>Retired</b>
---------------------------------	------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		22		2014

**Transaction ID : SA11Ai-CN13553**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Paul Gartlan Sr**

Mailing Address **1117 Bella Vista Ave**

City <b>Coral Gables</b>	State <b>FL</b>	Zip Code <b>33122</b>
-----------------------------	--------------------	--------------------------

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

Name of Employer <b>Professional Aviation Management</b>	Occupation <b>Owner</b>
---	----------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		30		2014

**Transaction ID : SA11Ai-CN14541**

Amount of Each Receipt this Period  
**1000**

TrnsRef: 86829697 CustRef: 15575305

**C.** Full Name (Last, First, Middle Initial)  
**Mr. William Childs Gay**

Mailing Address **200 Hillwood Avenue**

City <b>Richmond</b>	State <b>VA</b>	Zip Code <b>23226</b>
-------------------------	--------------------	--------------------------

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

Name of Employer <b>None</b>	Occupation <b>Retired</b>
---------------------------------	------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		17		2014

**Transaction ID : SA11Ai-CN12028**

Amount of Each Receipt this Period  
**250**

**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 34 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. A Blake Gayle**

Mailing Address 12526 Moates Drive

City Ashland State VA Zip Code 23005

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

Name of Employer Zwerdling Oppleman & Adams Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

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

**Transaction ID : SA11Ai-CN13696**

Amount of Each Receipt this Period  
**125**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Lorna J Gladstone Ph.D.**

Mailing Address 1161 Crest Ln

City Mc Lean State VA Zip Code 22101

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) Special General 2014

Election Cycle-to-Date **3100**

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

**Transaction ID : SA11Ai-CN13737**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Lorna J Gladstone Ph.D.**

Mailing Address 1161 Crest Ln

City Mc Lean State VA Zip Code 22101

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) Special General 2014

Election Cycle-to-Date **4700**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11Ai-CN14815**

Amount of Each Receipt this Period  
**1600**

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

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

**2725.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Lorna J Gladstone Ph.D.**

Mailing Address 1161 Crest Ln

City State Zip Code  
Mc Lean VA 22101

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5100**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		30		2014

**Transaction ID : SA11Ai-CN14816**

Amount of Each Receipt this Period  
**400**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John Douglas Granger**

Mailing Address 14424 Clipper Cove Court

City State Zip Code  
Midlothian VA 23112

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

Name of Employer Occupation  
Mapcom President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		28		2014

**Transaction ID : SA11Ai-CN14262**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Dana Norton Griffin**

Mailing Address 403 Chantecler Ave

City State Zip Code  
Richmond VA 23226

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

Name of Employer Occupation  
Requested Best Efforts

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		03		2014

**Transaction ID : SA11Ai-CN15251**

Amount of Each Receipt this Period  
**500**

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

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

**1400.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 152
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Mr. George Proctor Groseclose</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 19 / 2014	
Mailing Address 3101 Waterton Drive		<b>Transaction ID : SA11Ai-CN12673</b>	
City Midlothian	State VA	Zip Code 23113	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer Altria	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250		

Full Name (Last, First, Middle Initial) <b>B. Mr. George Proctor Groseclose</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2014	
Mailing Address 3101 Waterton Drive		<b>Transaction ID : SA11Ai-CN14809</b>	
City Midlothian	State VA	Zip Code 23113	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer Altria	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		
		TrnsRef: 86844365 CustRef: 15576755	

Full Name (Last, First, Middle Initial) <b>C. Mr. Joseph M Guiffre</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address 9417 Macklin Ct		<b>Transaction ID : SA11Ai-CN13118</b>	
City Alexandria	State VA	Zip Code 22309	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James L Hague**

Mailing Address 3708 Commodore Point Circle

City Midlothian State VA Zip Code 23112

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

Name of Employer VCU Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

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

**Transaction ID : SA11Ai-CN13676**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50

TrnsRef: 86603447 CustRef: 15489411

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James L Hague**

Mailing Address 3708 Commodore Point Circle

City Midlothian State VA Zip Code 23112

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

Name of Employer VCU Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11Ai-CN14729**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50

TrnsRef: 86834215 CustRef: 15489411

**C.** Full Name (Last, First, Middle Initial)  
**Mr Frank Michael Hale**

Mailing Address 11601 Durrington Drive

City North Chesterfield State VA Zip Code 23236

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

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

**Transaction ID : SA11Ai-CN14423**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100

TrnsRef: 86793181 CustRef: 15571175

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

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

\_\_\_\_\_ 200.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Barry Halvorsen**

Mailing Address 2702 Whittle Way

City Midland State TX Zip Code 79707

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

Name of Employer SELF Occupation ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **840**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 16 / 2014

**Transaction ID : SA11Ai-CN12829**

Amount of Each Receipt this Period  
 100

**B.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City Alexandria State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **61803**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 16 / 2014

**Transaction ID : SA11C-CN13015**

Amount of Each Receipt this Period  
 100

Earmarked contribution-Barry Halvorsen

**[MEMO ITEM]**  
 Total earmarked through conduit. PAC limit not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Mr Barry Halvorsen**

Mailing Address 2702 Whittle Way

City Midland State TX Zip Code 79707

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

Name of Employer SELF Occupation ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **890**

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

**Transaction ID : SA11Ai-CN13940**

Amount of Each Receipt this Period  
 50

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 39 OF 152  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City State Zip Code  
Alexandria VA 22313

FEC ID number of contributing federal political committee. **C** C00448696

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
76022

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

**Transaction ID : SA11C-CN14480**

Amount of Each Receipt this Period  
50

Earmarked contribution-Barry Halvorsen

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Hargett**

Mailing Address 13307 Virginia Willow Dr

City State Zip Code  
Fairfax VA 22033

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

Name of Employer Occupation  
Gate Gourmet Inc Corp Finance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2014

**Transaction ID : SA11Ai-CN12642**

Amount of Each Receipt this Period  
50

TrnsRef: 86211145 CustRef: 15462801

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Ashton Harrison**

Mailing Address 8905 Brennan Road

City State Zip Code  
Henrico VA 23229

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11Ai-CN14832**

Amount of Each Receipt this Period  
200

TrnsRef: 86884931 CustRef: 15578519

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John Gilbert Hekman**

Mailing Address 2400 Islandview Court

City State Zip Code  
Henrico VA 23233

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

Name of Employer Occupation  
Self Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**865**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		22		2014

**Transaction ID : SA11Ai-CN13547**

Amount of Each Receipt this Period  
**125**

**B.** Full Name (Last, First, Middle Initial)  
**Mr Brian Hennessey**

Mailing Address 1 Pine Island Rd

City State Zip Code  
Newbury MA 01951

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**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		22		2014

**Transaction ID : SA11Ai-CN13956**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City State Zip Code  
Alexandria VA 22313

FEC ID number of contributing federal political committee. **C** C00448696

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**71631**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		22		2014

**Transaction ID : SA11C-CN14496**

Amount of Each Receipt this Period  
**250**

Earmarked contribution-Brian Hennessey

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

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

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

**375.00**



**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 41 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Ronnie Carl Hickman**

Mailing Address 1520 Olde Coalmine Road

City Midlothian State VA Zip Code 23113

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

Name of Employer Requested Occupation Best Efforts

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 16 / 2014

**Transaction ID : SA11Ai-CN11806**

Amount of Each Receipt this Period  
 50

TrnsRef: 86100381 CustRef: 15361105

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Lee M Holmes**

Mailing Address PO Box Ar

City Hagatna State GU Zip Code 96932

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

Name of Employer Requested Occupation MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250**

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

**Transaction ID : SA11Ai-CN13967**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City Alexandria State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C** C00448696

Name of Employer Requested Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **84358**

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

**Transaction ID : SA11C-CN14507**

Amount of Each Receipt this Period  
 1000

Earmarked contribution-Lee Holmes

**[MEMO ITEM]**  
 Total earmarked through conduit. PAC limit not affected.

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 42 OF 152  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ms Jean Elizabeth Hope**

Mailing Address 11226 Valor Bridge Drive

City Spotsylvania State VA Zip Code 22551

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

Name of Employer Requested Occupation Best Efforts

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **240**

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

**Transaction ID : SA11Ai-CN13700**

Amount of Each Receipt this Period  
 100

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Patti L Hornstra**

Mailing Address 12420 Lynwood Drive

City Glen Allen State VA Zip Code 23059

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

Name of Employer Remax Commonwealth Occupation Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **280**

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

**Transaction ID : SA11Ai-CN14864**

Amount of Each Receipt this Period  
 30

**C.** Full Name (Last, First, Middle Initial)  
**Mr William Hotaling**

Mailing Address 125 Quassaick Ave

City New Windsor State NY Zip Code 12553

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 **1900**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2014

**Transaction ID : SA11Ai-CN13970**

Amount of Each Receipt this Period  
 300

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

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

430.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address **PO Box 388**

City **Alexandria** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**64921**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		18		2014

**Transaction ID : SA11C-CN14509**

Amount of Each Receipt this Period  
**300**

Earmarked contribution-William Hotaling

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Mr William Hotaling**

Mailing Address **125 Quassaick Ave**

City **New Windsor** State **NY** Zip Code **12553**

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  
**2200**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		22		2014

**Transaction ID : SA11Ai-CN13969**

Amount of Each Receipt this Period  
**300**

**C.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address **PO Box 388**

City **Alexandria** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**71631**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		22		2014

**Transaction ID : SA11C-CN14510**

Amount of Each Receipt this Period  
**300**

Earmarked contribution-William Hotaling

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

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

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

**300.00**

**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 44 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Carl Howard**

Mailing Address 1500 Voorhees Ave

City Manhattan Beach State CA Zip Code 90266

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **398**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 16 / 2014

**Transaction ID : SA11Ai-CN11843**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 199

TrnsRef: 86121439 CustRef: 15493837

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James M Irving**

Mailing Address PO Box 6096

City Mc Lean State VA Zip Code 22106

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

Name of Employer Self Occupation Investments

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : SA11Ai-CN13632**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250

**C.** Full Name (Last, First, Middle Initial)  
**Mr Marc Iverson**

Mailing Address 5200 Bevington Pl

City Charlotte State NC Zip Code 28277

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

Name of Employer Requested Occupation Best Efforts

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

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

**Transaction ID : SA11Ai-CN13977**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250

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

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

\_\_\_\_\_ 699.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City: Alexandria State: VA Zip Code: 22313

FEC ID number of contributing federal political committee: **C** C00448696

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 72501

Date of Receipt: 10 / 23 / 2014

**Transaction ID : SA11C-CN14518**

Amount of Each Receipt this Period: 250

Earmarked contribution-Marc Iverson

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Kay Coles James**

Mailing Address 5900 Country Walk Road

City: Midlothian State: VA Zip Code: 23112

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

Name of Employer: Gloucester Institute Occupation: President And Founder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 10 / 28 / 2014

**Transaction ID : SA11Ai-CN14357**

Amount of Each Receipt this Period: 1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Steven James Jenkins**

Mailing Address 14412 Riverside Drive

City: Ashland State: VA Zip Code: 23005

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

Name of Employer: Jenkins Financial Solutions Occupation: DBA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 225

Date of Receipt: 10 / 22 / 2014

**Transaction ID : SA11Ai-CN13548**

Amount of Each Receipt this Period: 125

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

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

1125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Jim Johnson**

Mailing Address **PO Box 1144**

City **Troy** State **MT** Zip Code **59935**

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

Name of Employer **CHLOR RID** Occupation **MARKETING**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **605**

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

**Transaction ID : SA11Ai-CN13985**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **100**

**B.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address **PO Box 388**

City **Alexandria** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **72501**

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

**Transaction ID : SA11C-CN14526**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **100**

Earmarked contribution-Jim Johnson

**[MEMO ITEM]**  
 Total earmarked through conduit. PAC limit not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Mr David Johnston**

Mailing Address **PO Box 1457**

City **Tulare** State **CA** Zip Code **93275**

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

Name of Employer **JAS** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **542**

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

**Transaction ID : SA11Ai-CN13987**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **25**

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

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

\_\_\_\_\_ **125.00**

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A. Senate Conservatives Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 388

City: Alexandria State: VA Zip Code: 22313

FEC ID number of contributing federal political committee: **C** C00448696

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 71631

Date of Receipt: 10 / 22 / 2014

**Transaction ID : SA11C-CN14528**

Amount of Each Receipt this Period: 25

Earmarked contribution-David Johnston

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**B. Mrs. Marilyn Johnston**

Full Name (Last, First, Middle Initial)  
Mailing Address 19355 Cypress Ridge Ter Unit 1012

City: Lansdowne State: VA Zip Code: 20176

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

Name of Employer: Occupation: Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2500

Date of Receipt: 10 / 21 / 2014

**Transaction ID : SA11Ai-CN13102**

Amount of Each Receipt this Period: 2000

**C. Mr. Hugh Anthony Jones**

Full Name (Last, First, Middle Initial)  
Mailing Address 3705 Favero Road

City: Henrico State: VA Zip Code: 23233

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

Name of Employer: Occupation: Commercial Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250

Date of Receipt: 10 / 25 / 2014

**Transaction ID : SA11Ai-CN13659**

Amount of Each Receipt this Period: 250

TrnsRef: 86578343 CustRef: 15545945

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Zane Jones**

Mailing Address 405 Chrislyn St

City State Zip Code  
Troy TX 76579

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

Name of Employer Occupation  
BROOKSHIRE BROTHERS PHARMACIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
238

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

**Transaction ID : SA11Ai-CN15029**

Amount of Each Receipt this Period  
238

**B.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City State Zip Code  
Alexandria VA 22313

FEC ID number of contributing federal political committee. **C** C00448696

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
80958

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

**Transaction ID : SA11C-CN15675**

Amount of Each Receipt this Period  
238

Earmarked contribution-Zane Jones

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Daniel Scott Jordan**

Mailing Address 12102 Wexwood Place

City State Zip Code  
North Chesterfield VA 23236

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

Name of Employer Occupation  
Classic Construction Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 16 / 2014

**Transaction ID : SA11Ai-CN12627**

Amount of Each Receipt this Period  
250

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

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

488.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ms Dee Jorgensen**

Mailing Address 149 W 400 N

City Blackfoot State ID Zip Code 83221

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 **300**

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

**Transaction ID : SA11Ai-CN15389**

Amount of Each Receipt this Period  
 100

**B.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City Alexandria State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **86067**

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

**Transaction ID : SA11C-CN15466**

Amount of Each Receipt this Period  
 100

Earmarked contribution-Dee Jorgensen

**[MEMO ITEM]**  
 Total earmarked through conduit. PAC limit not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Mr Michael Jose**

Mailing Address 2 Tallwood Rd

City Augusta State ME Zip Code 04330

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

Name of Employer TexTech Industries Occupation Lab Technician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2014

**Transaction ID : SA11Ai-CN15234**

Amount of Each Receipt this Period  
 50

TrnsRef: 86974235 CustRef: 15391791

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

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

150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Tammy Harris Jowers**

Mailing Address 15246 Abner Church Road

City	State	Zip Code
Glen Allen	VA	23059

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

Name of Employer	Occupation
None	Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1790**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		24		2014

**Transaction ID : SA11Ai-CN13630**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert M Kaus**

Mailing Address 1601 - B Oakwood Ave

City	State	Zip Code
Venice	CA	90291

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

Name of Employer	Occupation
Self	Writer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**850**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		28		2014

**Transaction ID : SA11Ai-CN13722**

Amount of Each Receipt this Period  
**100**

TrnsRef: 86673801 CustRef: 15560541

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Edwin Leslie Kayser**

Mailing Address 11410 Ivy Home Place

City	State	Zip Code
Henrico	VA	23233

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

Name of Employer	Occupation
Self	Logistics Consulting

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		03		2014

**Transaction ID : SA11Ai-CN15249**

Amount of Each Receipt this Period  
**200**

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

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

**550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Johnathan Hays Keene**

Mailing Address 9066 Hopkins Branch Way

City Mechanicsville State VA Zip Code 23116

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

Name of Employer Apex Automation Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 19 / 2014

**Transaction ID : SA11Ai-CN12652**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. F Jeffrey Keil**

Mailing Address PO Box 68

City Manakin Sabot State VA Zip Code 23103

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

Name of Employer Self Employed Occupation Educational Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **235**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 18 / 2014

**Transaction ID : SA11Ai-CN12643**

Amount of Each Receipt this Period  
**50**

TrnsRef: 86220075 CustRef: 15505615

**C.** Full Name (Last, First, Middle Initial)  
**Mr Bruce Kemp**

Mailing Address PO Box 1470

City Centreville State VA Zip Code 20122

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

Name of Employer Unemployed Occupation Unemployed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : SA11Ai-CN13996**

Amount of Each Receipt this Period  
**250**

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

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

**500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address **PO Box 388**

City **Alexandria** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **76022**

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

**Transaction ID : SA11C-CN14538**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **250**

Earmarked contribution-Bruce Kemp

**[MEMO ITEM]**  
 Total earmarked through conduit. PAC limit not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas Pascal Kidd Jr.**

Mailing Address **300 N. Ridge Rd # 57**

City **Henrico** State **VA** Zip Code **23229**

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

Name of Employer Occupation  
**None Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 16 / 2014**

**Transaction ID : SA11Ai-CN12628**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **500**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Cynthia Ghiloni Kines**

Mailing Address **PO Box 1865**

City **Stafford** State **VA** Zip Code **22555**

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

Name of Employer Occupation  
**Wells Fargo Advisor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

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

**Transaction ID : SA11Ai-CN13593**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **500**

**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 53 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Cynthia Ghiloni Kines**

Mailing Address PO Box 1865

City Stafford State VA Zip Code 22555

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

Name of Employer Wells Fargo Occupation Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2014**

**Transaction ID : SA11Ai-CN15236**

Amount of Each Receipt this Period  
**500**

TrnsRef: 86986157 CustRef: 15591015

**B.** Full Name (Last, First, Middle Initial)  
**Mr. David Kissner**

Mailing Address PO Box 364

City Colonial Heights Va State VA Zip Code 23834

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

Name of Employer UBS Financial Services Inc. Occupation Investment Management Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

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

**Transaction ID : SA11Ai-CN13565**

Amount of Each Receipt this Period  
**1000**

TrnsRef: 86462355 CustRef: 15532689

**C.** Full Name (Last, First, Middle Initial)  
**Mr Michael Klimoski**

Mailing Address 201 E 83rd St Apt 11f

City New York State NY Zip Code 10028

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 16 / 2014**

**Transaction ID : SA11Ai-CN12846**

Amount of Each Receipt this Period  
**200**

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

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

**1700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City: Alexandria State: VA Zip Code: 22313

FEC ID number of contributing federal political committee: **C** C00448696

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 61803

Date of Receipt: 10 / 16 / 2014

**Transaction ID : SA11C-CN13031**

Amount of Each Receipt this Period: 200

Earmarked contribution-Michael Klimoski

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Ms Peggy Korn**

Mailing Address 2911 Highway 19 W

City: Brownsville State: TN Zip Code: 38012

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

Name of Employer: Occupation: SELF FARMER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 350

Date of Receipt: 10 / 26 / 2014

**Transaction ID : SA11Ai-CN15043**

Amount of Each Receipt this Period: 100

**C.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City: Alexandria State: VA Zip Code: 22313

FEC ID number of contributing federal political committee: **C** C00448696

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 76828

Date of Receipt: 10 / 26 / 2014

**Transaction ID : SA11C-CN15688**

Amount of Each Receipt this Period: 100

Earmarked contribution-Peggy Korn

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

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

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Nicholas Jason Kuriger**

Mailing Address 1307 Libbie Avenue

City State Zip Code  
Henrico VA 23226

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

Name of Employer Occupation  
IT Director Norris Tysse Kampley and Lakis

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**450**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		30		2014

**Transaction ID : SA11Ai-CN14648**

Amount of Each Receipt this Period  
**200**

TrnsRef: 86832193 CustRef: 15575717

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John D Kwapisz**

Mailing Address 9410 Stammose Pl  
Apt L

City State Zip Code  
N Chesterfield VA 23236

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

Name of Employer Occupation  
Amer Council For Immigration Reform Legislative Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		03		2014

**Transaction ID : SA11Ai-CN15283**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Lisa Snellings Kyle**

Mailing Address 2314 Mountainbrook Drive

City State Zip Code  
Henrico VA 23233

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

Name of Employer Occupation  
Self Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**539.7**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		04		2014

**Transaction ID : SA11Ai-CN15392**

Amount of Each Receipt this Period  
**359.7**

Mileage  
In-Kind Received Mileage

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

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

**659.70**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 152
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Lisa Snellings Kyle</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 04 / 2014
Mailing Address 2314 Mountainbrook Drive		<b>Transaction ID : SA11Ai-CN15393</b>
City Henrico	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 397.49
Name of Employer Self	Occupation Contractor	Volunteer Refreshments
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 937.19	In-Kind Received Volunteer Refreshments

Full Name (Last, First, Middle Initial) <b>B. Mrs. Lisa Snellings Kyle</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 07 / 2014
Mailing Address 2314 Mountainbrook Drive		<b>Transaction ID : SA11Ai-CN15391</b>
City Henrico	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Self	Occupation Contractor	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) <b>C. Mr. Alan Michael Legas</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 16 / 2014
Mailing Address 13900 Bayport Landing Road		<b>Transaction ID : SA11Ai-CN12615</b>
City Midlothian	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50
Name of Employer None	Occupation Retired	TrnsRef: 86151399 CustRef: 15339873
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	697.49
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 57 OF 152  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Lesley**

Mailing Address **PO Box 707**

City **Brigham City** State **UT** Zip Code **84404**

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

Name of Employer **ATK Aerospace Systems** Occupation **Chemist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **215**

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

**Transaction ID : SA11Ai-CN14856**

Amount of Each Receipt this Period  
**25**

TrnsRef: 86950909 CustRef: 14899522

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Charles Lessin**

Mailing Address **6500 Patterson Avenue**

City **Richmond** State **VA** Zip Code **23226**

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

Name of Employer **Appalachian Biofuels** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2014**

**Transaction ID : SA11Ai-CN15252**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Herbert A Levin**

Mailing Address **724 E Grinnell Dr**

City **Burbank** State **CA** Zip Code **91501**

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

Name of Employer **Dept Of Justice CA** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 30 / 2014**

**Transaction ID : SA11Ai-CN14820**

Amount of Each Receipt this Period  
**100**

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

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

**1125.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Lico**

Mailing Address 202 Willetta Dr

City Richmond State VA Zip Code 23221

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

Name of Employer Dominion Resources Services Inc. Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

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

**Transaction ID : SA11Ai-CN13571**

Amount of Each Receipt this Period  
**500**

TrnsRef: 86467795 CustRef: 15533365

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Michelle Gonzales Liewehr**

Mailing Address 9244 Royal Grant Drive

City Mechanicsville State VA Zip Code 23116

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **410**

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

**Transaction ID : SA11Ai-CN13624**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr Leonard Spears Littlejohn Jr.**

Mailing Address 1825 Early Settlers Road

City North Chesterfield State VA Zip Code 23235

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

Name of Employer Va Paint Co Occupation Retail Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : SA11Ai-CN13120**

Amount of Each Receipt this Period  
**100**

TrnsRef: 86362041 CustRef: 15524857

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

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

**700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 152
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Mr. Charles Samuel Luck III</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014	
Mailing Address 127 Kennondale Lane		<b>Transaction ID : SA11Ai-CN13596</b>	
City Richmond	State VA	Amount of Each Receipt this Period 2500	
Zip Code 23226			
FEC ID number of contributing federal political committee. C			
Name of Employer Luck Companies	Occupation Chairman		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500		

Full Name (Last, First, Middle Initial) <b>B. Mr. Charles Samuel Luck III</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014	
Mailing Address 127 Kennondale Lane		<b>Transaction ID : SA11Ai-CN13597</b>	
City Richmond	State VA	Amount of Each Receipt this Period 2500	
Zip Code 23226			
FEC ID number of contributing federal political committee. C			
Name of Employer Luck Companies	Occupation Chairman		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special General 2014	Election Cycle-to-Date 5000		

Full Name (Last, First, Middle Initial) <b>C. Mr. Wickliffe Sanford Lyne</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address 13303 Torrington Drive		<b>Transaction ID : SA11Ai-CN13110</b>	
City Midlothian	State VA	Amount of Each Receipt this Period 250	
Zip Code 23113			
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. David Marin**

Mailing Address 12201 Hounds Ln

City Reston State VA Zip Code 20191

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

Name of Employer Podesta Group Occupation consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : SA11Ai-CN13685**

Amount of Each Receipt this Period  
**250**

TrnsRef: 86622445 CustRef: 15554441

**B.** Full Name (Last, First, Middle Initial)  
**Mr Jack Mayfield**

Mailing Address 5611 Ursula Ln

City Dallas State TX Zip Code 75229

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

Name of Employer SELF Occupation REAL ESTATE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **205**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2014

**Transaction ID : SA11Ai-CN12858**

Amount of Each Receipt this Period  
**205**

**C.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City Alexandria State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **64921**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2014

**Transaction ID : SA11C-CN13043**

Amount of Each Receipt this Period  
**205**

Earmarked contribution-Jack Mayfield

**[MEMO ITEM]**  
 Total earmarked through conduit. PAC limit not affected.

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

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

**455.00**

**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 61 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James McConville**

Mailing Address 1003 Emerald Dr

City: Alexandria State: VA Zip Code: 22308

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

Name of Employer: Lockheed Martin Occupation: Manufacturing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250

Date of Receipt: 10 / 31 / 2014

**Transaction ID : SA11Ai-CN14844**

Amount of Each Receipt this Period: 250

TrnsRef: 86928465 CustRef: 15583715

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John Early McDonald Jr.**

Mailing Address 12100 Drumore Court

City: Glen Allen State: VA Zip Code: 23059

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

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 275

Date of Receipt: 10 / 19 / 2014

**Transaction ID : SA11Ai-CN12653**

Amount of Each Receipt this Period: 75

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Kelli Rurdy Meadows**

Mailing Address 12304 Ellaberry Lane

City: Glen Allen State: VA Zip Code: 23059

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

Name of Employer: Meadows Urquhart Occupation: CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 375

Date of Receipt: 10 / 21 / 2014

**Transaction ID : SA11Ai-CN13103**

Amount of Each Receipt this Period: 125

**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 62 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Andrew Middleton**

Mailing Address 87 Cypress Ln

City State Zip Code  
Mount Sidney VA 24467

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

Name of Employer Occupation  
CES ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**735**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		18		2014

**Transaction ID : SA11Ai-CN12862**

Amount of Each Receipt this Period  
**10**

**B.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City State Zip Code  
Alexandria VA 22313

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**64921**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		18		2014

**Transaction ID : SA11C-CN13047**

Amount of Each Receipt this Period  
**10**

Earmarked contribution-Andrew Middleton

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas Millner**

Mailing Address PO Box 179

City State Zip Code  
Sidney NE 69162

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

Name of Employer Occupation  
Cabela's Chief Executive Outfitter

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		03		2014

**Transaction ID : SA11Ai-CN15280**

Amount of Each Receipt this Period  
**250**

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

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

**260.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Raymond Moore**

Mailing Address 567 B Southlake Blvd

City	State	Zip Code
Richmond	VA	23236

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

Name of Employer Requested	Occupation
	Best Efforts

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		19		2014

**Transaction ID : SA11Ai-CN12669**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Mary Moreton**

Mailing Address 1277 W Tortolita Mountain Cir

City	State	Zip Code
Oro Valley	AZ	85755

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		24		2014

**Transaction ID : SA11Ai-CN14081**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City	State	Zip Code
Alexandria	VA	22313

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**76022**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		24		2014

**Transaction ID : SA11C-CN14626**

Amount of Each Receipt this Period  
**500**

Earmarked contribution-Mary Moreton

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**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 64 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Steven Mullins**

Mailing Address 1127 Walker Rd

City State Zip Code  
Great Falls VA 22066

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

Name of Employer Occupation  
KZO Innovations Inc. CFO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**675**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		29		2014

**Transaction ID : SA11Ai-CN14430**

Amount of Each Receipt this Period  
**500**

TrnsRef: 86815667 CustRef: 15573587

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Ellis F Naegele**

Mailing Address 7993 Via Vecchia

City State Zip Code  
Naples FL 34108

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		28		2014

**Transaction ID : SA11Ai-CN14302**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert O Naegele**

Mailing Address 7993 Via Vecchia

City State Zip Code  
Naples FL 34108

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		28		2014

**Transaction ID : SA11Ai-CN14299**

Amount of Each Receipt this Period  
**1000**

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

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

**2500.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 152
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Mr. Robert Allen Nelson Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address 10216 Waxcomb Place		<b>Transaction ID : SA11Ai-CN13626</b>	
City Mechanicsville	State VA	Zip Code 23116	Amount of Each Receipt this Period 125
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 725.5		

Full Name (Last, First, Middle Initial) <b>B. Mr. Paul Elliot Newman</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014	
Mailing Address PO Box 1273		<b>Transaction ID : SA11Ai-CN13585</b>	
City Midlothian	State VA	Zip Code 23113	Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C			
Name of Employer GE	Occupation Management		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		

Full Name (Last, First, Middle Initial) <b>C. Mr Richard Nord</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 19 / 2014	
Mailing Address 6256 Shadyside Dr		<b>Transaction ID : SA11Ai-CN12869</b>	
City Vermilion	State OH	Zip Code 44089	Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C			
Name of Employer LAND CONCEPTS CO. INC.	Occupation LANDSCAPE CONSULTANT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1625.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A. Full Name (Last, First, Middle Initial)**  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City: Alexandria State: VA Zip Code: 22313

FEC ID number of contributing federal political committee: **C** C00448696

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 66685

Date of Receipt: 10 / 19 / 2014

**Transaction ID : SA11C-CN13054**

Amount of Each Receipt this Period: 1000

Earmarked contribution-Richard Nord

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**B. Full Name (Last, First, Middle Initial)**  
**Mr. Mark Boehling O'Brien**

Mailing Address 3801 Indigo Run Drive

City: Henrico State: VA Zip Code: 23233

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

Name of Employer: Occupation:  
O'Brien Associates Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250

Date of Receipt: 10 / 16 / 2014

**Transaction ID : SA11Ai-CN12630**

Amount of Each Receipt this Period: 250

**C. Full Name (Last, First, Middle Initial)**  
**Mr. David C O'Leary**

Mailing Address 1815 Green Springs Road E

City: Louisa State: VA Zip Code: 23093

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

Name of Employer: Occupation:  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 350

Date of Receipt: 10 / 16 / 2014

**Transaction ID : SA11Ai-CN11856**

Amount of Each Receipt this Period: 100

TrnsRef: 86123891 CustRef: 15494457

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Susan Bland O'Rourke**

Mailing Address 311 Four Islands Trail

City Lanexa State VA Zip Code 23089

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

Name of Employer Self Occupation Shop Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **605**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11Ai-CN14834**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50

TrnsRef: 86888067 CustRef: 15181921

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Alison Moon O'Shanick**

Mailing Address 3120 Summerhurst Drive

City Midlothian State VA Zip Code 23113

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

Name of Employer CNS PC Occupation Speech Pathologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

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

**Transaction ID : SA11Ai-CN13698**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Judith Ochs**

Mailing Address 1437 Layman St

City Mc Lean State VA Zip Code 22101

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

Name of Employer Self Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

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

**Transaction ID : SA11Ai-CN13745**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 150

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

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

\_\_\_\_\_ 1200.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Lindsey Paulsen**

Mailing Address 711 Chalfonte Dr

City State Zip Code  
Alexandria VA 22305

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

Name of Employer Occupation  
Self Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

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

**Transaction ID : SA11Ai-CN14420**

Amount of Each Receipt this Period  
**250**

TrnsRef: 86747627 CustRef: 15569703

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Frank Alan Pearson**

Mailing Address 842 Dover Bluff Place

City State Zip Code  
Manakin Sabot VA 23103

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

Name of Employer Occupation  
Extended Service Corp Mgr

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2014

**Transaction ID : SA11Ai-CN12646**

Amount of Each Receipt this Period  
**1000**

TrnsRef: 86227487 CustRef: 15506905

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Harry Donald Penzler**

Mailing Address 11908 Brookmeade Court

City State Zip Code  
Glen Allen VA 23059

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

Name of Employer Occupation  
Army Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**800**

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

**Transaction ID : SA11Ai-CN13715**

Amount of Each Receipt this Period  
**200**

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

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

**1450.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Carla Ann Polito**

Mailing Address 846 Parkland Place

City State Zip Code  
Glen Allen VA 23059

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

Name of Employer Occupation  
TH Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**320**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 01 / 2014**

**Transaction ID : SA11Ai-CN15402**

Amount of Each Receipt this Period  
**20**

**B.** Full Name (Last, First, Middle Initial)  
**Ms Elaine K Portier**

Mailing Address 15770 SW Towhee Ln

City State Zip Code  
Beaverton OR 97007

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

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

**Transaction ID : SA11Ai-CN13562**

Amount of Each Receipt this Period  
**50**

TrnsRef: 86456843 CustRef: 15488687

**C.** Full Name (Last, First, Middle Initial)  
**Ms Elaine K Portier**

Mailing Address 15770 SW Towhee Ln

City State Zip Code  
Beaverton OR 97007

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

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

**Transaction ID : SA11Ai-CN13610**

Amount of Each Receipt this Period  
**50**

TrnsRef: 86515465 CustRef: 15488687

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

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

**120.00**

**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 70 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ms Elaine K Portier**

Mailing Address 15770 SW Towhee Ln

City State Zip Code  
Beaverton OR 97007

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2014

**Transaction ID : SA11Ai-CN14116**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City State Zip Code  
Alexandria VA 22313

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**76022**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2014

**Transaction ID : SA11C-CN14662**

Amount of Each Receipt this Period  
**50**

Earmarked contribution-Elaine Portier

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Ms Elaine K Portier**

Mailing Address 15770 SW Towhee Ln

City State Zip Code  
Beaverton OR 97007

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

**Transaction ID : SA11Ai-CN15098**

Amount of Each Receipt this Period  
**50**

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

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

**100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A. Senate Conservatives Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 388

City: Alexandria State: VA Zip Code: 22313

FEC ID number of contributing federal political committee: **C** C00448696

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 79046

Date of Receipt: 10 / 27 / 2014

**Transaction ID : SA11C-CN15502**

Amount of Each Receipt this Period: 50

Earmarked contribution-Elaine Portier

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**B. Ms Elaine K Portier**

Full Name (Last, First, Middle Initial)  
Mailing Address 15770 SW Towhee Ln

City: Beaverton State: OR Zip Code: 97007

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

Name of Employer: Occupation: HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 450

Date of Receipt: 10 / 27 / 2014

**Transaction ID : SA11Ai-CN13719**

Amount of Each Receipt this Period: 50

TrnsRef: 86669705 CustRef: 15488687

**C. Ms Elaine K Portier**

Full Name (Last, First, Middle Initial)  
Mailing Address 15770 SW Towhee Ln

City: Beaverton State: OR Zip Code: 97007

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

Name of Employer: Occupation: HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 10 / 29 / 2014

**Transaction ID : SA11Ai-CN15099**

Amount of Each Receipt this Period: 50

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

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address **PO Box 388**

City **Alexandria** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**84358**

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

**Transaction ID : SA11C-CN15501**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50**

Earmarked contribution-Elaine Portier

**[MEMO ITEM]**  
 Total earmarked through conduit. PAC limit not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Ms Elaine K Portier**

Mailing Address **15770 SW Towhee Ln**

City **Beaverton** State **OR** Zip Code **97007**

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

Name of Employer Occupation  
**HOMEMAKER HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**550**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 30 / 2014**

**Transaction ID : SA11Ai-CN14831**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50**

TrnsRef: 86884475 CustRef: 15488687

**C.** Full Name (Last, First, Middle Initial)  
**Ms Elaine K Portier**

Mailing Address **15770 SW Towhee Ln**

City **Beaverton** State **OR** Zip Code **97007**

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

Name of Employer Occupation  
**HOMEMAKER HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600**

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

**Transaction ID : SA11Ai-CN15385**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50**

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

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

\_\_\_\_\_ **100.00**

\_\_\_\_\_



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address **PO Box 388**

City **Alexandria** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **86067**

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

**Transaction ID : SA11C-CN15500**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50**

Earmarked contribution-Elaine Portier

**[MEMO ITEM]**  
 Total earmarked through conduit. PAC limit not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Ms Elaine K Portier**

Mailing Address **15770 SW Towhee Ln**

City **Beaverton** State **OR** Zip Code **97007**

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

Name of Employer Occupation  
**HOMEMAKER HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2014**

**Transaction ID : SA11Ai-CN15245**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50**

TrnsRef: 87004631 CustRef: 15502043

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Lawrence D Pratt**

Mailing Address **8522 Wild Spruce Dr**

City **Springfield** State **VA** Zip Code **22153**

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

Name of Employer Occupation  
**Gun Owners of America Executive Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 30 / 2014**

**Transaction ID : SA11Ai-CN14806**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **200**

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

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

\_\_\_\_\_ **250.00**

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Susan Maley Rash**

Mailing Address 460 Bel Bridge Cir

City Midlothian State VA Zip Code 23113

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

Name of Employer **BB&T** Occupation **Insurance Services**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 16 / 2014**

**Transaction ID : SA11Ai-CN12629**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Patricia Bell Remaklus**

Mailing Address PO Box 35025

City Richmond State VA Zip Code 23235

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

Name of Employer **Willmann-Bell Inc.** Occupation **Businesswoman**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

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

**Transaction ID : SA11Ai-CN13620**

Amount of Each Receipt this Period  
**500**

TrnsRef: 86539115 CustRef: 15541239

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Patricia Jane Renn**

Mailing Address 15105 Cypress Creek Lane

City Doswell State VA Zip Code 23047

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225**

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

**Transaction ID : SA11Ai-CN13544**

Amount of Each Receipt this Period  
**75**

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

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

**1075.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John Joseph Ronayne**

Mailing Address 6305 Denise Lynn Court

City Mechanicsville State VA Zip Code 23111

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

Name of Employer Self Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

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

**Transaction ID : SA11Ai-CN13538**

Amount of Each Receipt this Period  
 100

TrnsRef: 86375745 CustRef: 15527069

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Barbara Mode Rose**

Mailing Address 8701 Berwickshire Dr

City Henrico State VA Zip Code 23229

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11Ai-CN14819**

Amount of Each Receipt this Period  
 100

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Stephen A Rosenthal**

Mailing Address PO Box 20435

City Roanoke State VA Zip Code 24018

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 **575**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2014

**Transaction ID : SA11Ai-CN15279**

Amount of Each Receipt this Period  
 75

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

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

275.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Charles Rotgin Jr**

Mailing Address PO Box 5526

City Charlottesville State VA Zip Code 22905

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

Name of Employer Great Eastern Management Co Occupation Property Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 03 / 2014**

**Transaction ID : SA11Ai-CN15270**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr William Courthney Ryan Jr.**

Mailing Address 3111 Middlewood Rd

City Midlothian State VA Zip Code 23113

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 **365**

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

**Transaction ID : SA11Ai-CN13582**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr William Courthney Ryan Jr.**

Mailing Address 3111 Middlewood Rd

City Midlothian State VA Zip Code 23113

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 **385**

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

**Transaction ID : SA11Ai-CN13733**

Amount of Each Receipt this Period  
**20**

TrnsRef: 86684970 CustRef: 15562146

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

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

**1120.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Eric Ronald Samuelson**

Mailing Address 12518 Stagfield Road

City Ashland State VA Zip Code 23005

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225**

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

**Transaction ID : SA11Ai-CN13578**

Amount of Each Receipt this Period  
 125

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Craig Scelzi**

Mailing Address 5733 Arrington Blvd

City Glen Allen State VA Zip Code 23059

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

Name of Employer TECC Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000**

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

**Transaction ID : SA11Ai-CN13657**

Amount of Each Receipt this Period  
 1000

TrnsRef: 86573525 CustRef: 15545173

**C.** Full Name (Last, First, Middle Initial)  
**Mr John Seal**

Mailing Address 514 Via De Fortuna Way

City Mesquite State NV Zip Code 89027

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

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

**Transaction ID : SA11Ai-CN15134**

Amount of Each Receipt this Period  
 50

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

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

1175.00

**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 78 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address **PO Box 388**

City **Alexandria** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**79046**

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

**Transaction ID : SA11C-CN15790**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50**

Earmarked contribution-John Seal

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robin Shearin**

Mailing Address **12 Confederate Ave N**

City **Sandston** State **VA** Zip Code **23150**

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

Name of Employer Occupation  
**Retreat Doctors Hospital Maintenance**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**215**

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

**Transaction ID : SA11Ai-CN13673**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **25**

TrnsRef: 86586361 CustRef: 15222031

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Duncan Cameron Sheils**

Mailing Address **11400 Wood Brook Court**

City **Glen Allen** State **VA** Zip Code **23059**

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

Name of Employer Occupation  
**Delta Dental of Virginia Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**625**

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

**Transaction ID : SA11Ai-CN14412**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **100**

TrnsRef: Approval

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

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

\_\_\_\_\_ **125.00**

\_\_\_\_\_

**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 79 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. William Simmons**

Mailing Address 106 Summerwood Dr

City Panama City Beach State FL Zip Code 32413

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

Name of Employer Self Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

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

**Transaction ID : SA11Ai-CN12758**

Amount of Each Receipt this Period  
**100**

TrnsRef: 86312637 CustRef: 15518039

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Allen Simon**

Mailing Address 1383 Criss St N

City Chandler State AZ Zip Code 85226

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 **2025**

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

**Transaction ID : SA11Ai-CN14155**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Senate Conservatives Fund**

Mailing Address PO Box 388

City Alexandria State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **84358**

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

**Transaction ID : SA11C-CN14705**

Amount of Each Receipt this Period  
**1000**

Earmarked contribution-Allen Simon

**[MEMO ITEM]**  
 Total earmarked through conduit. PAC limit not affected.

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

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

**1100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Dana James Smith**

Mailing Address 2708 Bowles Lane

City State Zip Code  
Glen Allen VA 23060

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

Name of Employer Occupation  
Henrico County Public School Teacher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**381**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 01 / 2014**

**Transaction ID : SA11Ai-CN15399**

Amount of Each Receipt this Period  
**30**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James Alan Smyers**

Mailing Address 13127 Scotchtown Road

City State Zip Code  
Beaverdam VA 23015

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

Name of Employer Occupation  
VMI Systems VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**775**

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

**Transaction ID : SA11Ai-CN13699**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Pete Snyder**

Mailing Address 2105 Wakefield Ct

City State Zip Code  
Alexandria VA 22307

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

Name of Employer Occupation  
Disruptor Capital Entrepreneur

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**280.74**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 30 / 2014**

**Transaction ID : SA11Ai-CN14824**

Amount of Each Receipt this Period  
**280.74**

Event Catering

In-Kind Received Event Catering

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

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

**410.74**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Mildred Spevak**

Mailing Address **PO Box 246**

City **Manakin Sabot** State **VA** Zip Code **23103**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		30		2014

**Transaction ID : SA11Ai-CN14823**

Amount of Each Receipt this Period  

25
----

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Brian Stanley**

Mailing Address **4500 Pecan Meadow Ct**

City **Ft Worth** State **TX** Zip Code **76140**

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

Name of Employer **N/A** Occupation **N/A**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		17		2014

**Transaction ID : SA11Ai-CN12635**

Amount of Each Receipt this Period  

100
-----

TrnsRef: 86192509 CustRef: 15501587

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Kathie Stansell**

Mailing Address **363 Potomac Shore Dr**

City **Heathsville** State **VA** Zip Code **22673**

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

Name of Employer **Grimball Jewelers** Occupation **Sales Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		24		2014

**Transaction ID : SA11Ai-CN13616**

Amount of Each Receipt this Period  

50
----

TrnsRef: 86525457 CustRef: 15177957

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

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

175.00
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**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Cynthia M Stevens**

Mailing Address 424 North Alfred St

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
Deloitte Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11Ai-CN14810**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. W Robert Stover**

Mailing Address 120 Wildwood Gdns

City State Zip Code  
Piedmont CA 94611

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

Name of Employer Occupation  
Requested Best Efforts

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

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

**Transaction ID : SA11Ai-CN15196**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Jean R Tatum**

Mailing Address 5921 A Brookfield Rd

City State Zip Code  
Richmond VA 23227

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

Name of Employer Occupation  
William K. Grogan & Associates AWYER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11Ai-CN14679**

Amount of Each Receipt this Period  
**50**

TrnsRef: 86832605 CustRef: 14877449

**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 83 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Marilyn J Taylor**

Mailing Address 804 Tobaccoport Rd

City State Zip Code  
Bumpus Mills TN 37028

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1150**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		19		2014

**Transaction ID : SA11Ai-CN12677**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Byron Thomas**

Mailing Address 2407 Wroxtton Rd

City State Zip Code  
Houston TX 77005

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1450**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		25		2014

**Transaction ID : SA11Ai-CN13666**

Amount of Each Receipt this Period  
**100**

TrnsRef: 86581731 CustRef: 15005957

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Judith Lynn Tilley**

Mailing Address 10326 Autumn Drive

City State Zip Code  
Ashland VA 23005

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

Name of Employer Occupation  
RJ Tilley Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**275**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		16		2014

**Transaction ID : SA11Ai-CN11877**

Amount of Each Receipt this Period  
**100**

TrnsRef: 86124123 CustRef: 15494525

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

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

**300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jonathan Traub**

Mailing Address 1725 Stonebridge Rd

City State Zip Code  
Alexandria VA 22304

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

Name of Employer Occupation  
Deloitte Touche Policy Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

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

**Transaction ID : SA11Ai-CN13622**

Amount of Each Receipt this Period  
**500**

CC

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Cathy Trauernicht**

Mailing Address 7707 Crossover Dr

City State Zip Code  
Mc Lean VA 22102

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

Name of Employer Occupation  
self entrepreneur

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**550**

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

**Transaction ID : SA11Ai-CN13564**

Amount of Each Receipt this Period  
**150**

TrnsRef: 86461895 CustRef: 14810235

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Ed Turnage**

Mailing Address PO Box 427

City State Zip Code  
Ashland VA 23005

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

Name of Employer Occupation  
RMC Coach

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**375**

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

**Transaction ID : SA11Ai-CN13546**

Amount of Each Receipt this Period  
**125**

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

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

**775.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. E Massie Valentine Jr.**

Mailing Address 319 Oak Lane

City Richmond State VA Zip Code 23226

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

Name of Employer Davenport & Co LLC Occupation Stockbroker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 01 / 2014**

**Transaction ID : SA11Ai-CN15205**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Ed Raymond Vaughn Jr.**

Mailing Address PO Box 193

City Hanover State VA Zip Code 23069

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 16 / 2014**

**Transaction ID : SA11Ai-CN15275**

Amount of Each Receipt this Period  
**2500**

Event Space Rental & Refreshments  
 In-Kind Received Event Space Rental & Refreshments

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Ed Raymond Vaughn Jr.**

Mailing Address PO Box 193

City Hanover State VA Zip Code 23069

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify) Special General 2014

Election Cycle-to-Date **2625**

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

**Transaction ID : SA11Ai-CN13590**

Amount of Each Receipt this Period  
**125**

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

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

**3625.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Carol Ann Viall**

Mailing Address 13466 Lower Lakes Place

City Ashland	State VA	Zip Code 23005
-----------------	-------------	-------------------

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

Name of Employer Tweed	Occupation Owner
---------------------------	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**675**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		19		2014

**Transaction ID : SA11Ai-CN12655**

Amount of Each Receipt this Period  
**175**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Stephen Wampler**

Mailing Address 1295 Yorkshire Loop

City Tracy	State CA	Zip Code 95376
---------------	-------------	-------------------

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

Name of Employer Lawrence Livermore National Lab.	Occupation Public Information Officer
--	--

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		24		2014

**Transaction ID : SA11Ai-CN13649**

Amount of Each Receipt this Period  
**150**

**C.** Full Name (Last, First, Middle Initial)  
**Club For Growth PAC**

Mailing Address 2001 L ST NW SUITE 600

City Washington	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C C00432260**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**200**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		24		2014

**Transaction ID : SA11C-CN13650**

Amount of Each Receipt this Period  
**150**

Earmarked contribution-Stephen Wampler

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**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 87 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Gregory Warren**

Mailing Address 5511 Ruxton Dr

City Lanham State MD Zip Code 20706

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

Name of Employer PES Occupation Sr. Project Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **210**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 16 / 2014

**Transaction ID : SA11Ai-CN11754**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 35

TrnsRef: 86086971 CustRef: 14969755

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Gregory Warren**

Mailing Address 5511 Ruxton Dr

City Lanham State MD Zip Code 20706

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

Name of Employer PES Occupation Sr. Project Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **235**

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

**Transaction ID : SA11Ai-CN13724**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 25

TrnsRef: 86678368 CustRef: 15220477

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Emory Eugene Williams**

Mailing Address 9150 James Riverwatch Drive

City Richmond State VA Zip Code 23235

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 **700**

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

**Transaction ID : SA11Ai-CN15268**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100

TrnsRef: 87132885 CustRef: 15607907

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

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

\_\_\_\_\_ 160.00

\_\_\_\_\_

**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 88 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Kevin Wood**

Mailing Address 327 Clovelly Rd

City	State	Zip Code
Richmond	VA	23221

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

Name of Employer	Occupation
Wells Fargo Advisors LLC	Financial Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 500

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

**Transaction ID : SA11Ai-CN14843**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500

TrnsRef: 86926399 CustRef: 15583361

**B.** Full Name (Last, First, Middle Initial)  
**Mr. William Newton Wood Jr.**

Mailing Address 206 College Avenue

City	State	Zip Code
Ashland	VA	23005

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

Name of Employer	Occupation
None	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 325

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2014

**Transaction ID : SA11Ai-CN12654**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 125

**C.** Full Name (Last, First, Middle Initial)  
**Mr. E Randolph Wootton Jr**

Mailing Address 10012 Oldfield Dr

City	State	Zip Code
Richmond	VA	23235

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

Name of Employer	Occupation
WMA LLC	Marketing Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 300

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

**Transaction ID : SA11Ai-CN15269**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100

TrnsRef: 87179477 CustRef: 15381691

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

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

\_\_\_\_\_ 725.00

\_\_\_\_\_



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Coleman Wortham III**

Mailing Address PO Box 85678

City Richmond State VA Zip Code 23285

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

Name of Employer Davenport & Co LLC Occupation Financial Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11Ai-CN14822**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Lindsay B Wortham**

Mailing Address 2301 Monument Ave

City Richmond State VA Zip Code 23220

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11Ai-CN14821**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. George Lindsey Wright Jr.**

Mailing Address 7314 Cabell Pl

City Mechanicsville State VA Zip Code 23111

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

Name of Employer Merchants Fixture Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2014

**Transaction ID : SA11Ai-CN14826**

Amount of Each Receipt this Period  
**125**

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

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

**5325.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Russell Alton Wright II**

Mailing Address 11482 Franklin Hills Drive

City State Zip Code  
Rockville VA 23146

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

Name of Employer Occupation  
Capital One IT Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**410**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		01		2014

**Transaction ID : SA11Ai-CN15217**

Amount of Each Receipt this Period  
**10**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Tracy Young**

Mailing Address PO Box 1403

City State Zip Code  
Gualala CA 95445

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**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		25		2014

**Transaction ID : SA11Ai-CN13670**

Amount of Each Receipt this Period  
**35**

TrnsRef: 86585017 CustRef: 15395821

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Tracy Young**

Mailing Address PO Box 1403

City State Zip Code  
Gualala CA 95445

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  
**475**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		27		2014

**Transaction ID : SA11Ai-CN13705**

Amount of Each Receipt this Period  
**25**

TrnsRef: 86628137 CustRef: 15395821

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

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

**70.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**C & M Company USA LLC**

Mailing Address **PO Box 2334**

City **Mechanicsville** State **VA** Zip Code **23116**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 19 / 2014**

**Transaction ID : SA11Ai-CN12658**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

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

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

Amount of Each Receipt this Period

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

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

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

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

Amount of Each Receipt this Period

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

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

**250.00**

**78419.18**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 152
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Citizens United Political Victory Fund</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2014
Mailing Address 1006 Pennsylvania Ave. SE		<b>Transaction ID : SA11C-CN14860</b>
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee.	C C00295527	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	
		Amount of Each Receipt this Period 1500

Full Name (Last, First, Middle Initial) <b>B. Ed Gillespie For Senate</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2014
Mailing Address PO Box 71596		<b>Transaction ID : SA11C-CN15857</b>
City Richmond	State VA	Zip Code 23255
FEC ID number of contributing federal political committee.	C C00555722	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 615.39	
		Amount of Each Receipt this Period 615.39 Reimburse Shared Campaign Event Expenses

Full Name (Last, First, Middle Initial) <b>C. Eye Of The Tiger PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 03 / 2014
Mailing Address PO Box 2485		<b>Transaction ID : SA11C-CN15277</b>
City Springfield	State VA	Zip Code 22152
FEC ID number of contributing federal political committee.	C C00467431	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	
		Amount of Each Receipt this Period 2500

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4615.39
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Friends of Manual Alvarez**

Mailing Address 2960 Willow Trace Ln

City State Zip Code  
Sandy Hook VA 23153

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**125**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2014

**Transaction ID : SA11C-CN14425**

Amount of Each Receipt this Period  
**125**

**B.** Full Name (Last, First, Middle Initial)  
**Friends Of Trip Chalkley**

Mailing Address PO Box 722

City State Zip Code  
Ashland VA 23005

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**125**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

**Transaction ID : SA11C-CN13576**

Amount of Each Receipt this Period  
**125**

**C.** Full Name (Last, First, Middle Initial)  
**General Cigar PAC**

Mailing Address 10900 Nuckols Rd  
Ste 100

City State Zip Code  
Glen Allen VA 23060

FEC ID number of contributing federal political committee. **C C00488320**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2014

**Transaction ID : SA11C-CN12633**

Amount of Each Receipt this Period  
**1000**

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Halliburton PAC**

Mailing Address 801 17th St NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00035691

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500

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

**Transaction ID : SA11C-CN14859**

Amount of Each Receipt this Period  
 1500

**B.** Full Name (Last, First, Middle Initial)  
**Intl Premium Cigar & Pipe Retailers Assn PAC**

Mailing Address 610 S Boulevard

City Tampa State FL Zip Code 33606

FEC ID number of contributing federal political committee. **C** C00450239

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

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

**Transaction ID : SA11C-CN13638**

Amount of Each Receipt this Period  
 1000

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

Mailing Address 2901 Telestart Ct

City Falls Church State VA Zip Code 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 1000

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

**Transaction ID : SA11C-CN13619**

Amount of Each Receipt this Period  
 1000

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**National Pro-Life Alliance PAC**

Mailing Address 5211 Port Royal Rd #500

City Springfield State VA Zip Code 22151

FEC ID number of contributing federal political committee. **C** C00358051

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500

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

**Transaction ID : SA11C-CN13591**

Amount of Each Receipt this Period  
 500

**B.** Full Name (Last, First, Middle Initial)  
**New York Life Insurance PAC**

Mailing Address 51 Madison Ave  
Room 1109

City New York State NY Zip Code 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500

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

**Transaction ID : SA11C-CN13607**

Amount of Each Receipt this Period  
 2500

**C.** Full Name (Last, First, Middle Initial)  
**Turkish Coalition USA - PAC**

Mailing Address 1025 Connecticut Ave NW  
Ste 1000

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00432526

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

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

**Transaction ID : SA11C-CN14866**

Amount of Each Receipt this Period  
 1000

**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 96 OF 152	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Verizon Communications Inc. Good**

Mailing Address 1300 I St NW  
Ste 400 West

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
M M / D D / Y Y Y Y  
**11 / 03 / 2014**

**Transaction ID : SA11C-CN15278**

Amount of Each Receipt this Period  
**2500**

**B.** Full Name (Last, First, Middle Initial)  
**Williams Mullen Clark & Dobbins PAC**

Mailing Address 1666 K Street NW Ste 1200

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00515189**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750**

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

**Transaction ID : SA11C-CN14339**

Amount of Each Receipt this Period  
**750**

**C.** Full Name (Last, First, Middle Initial)  
**American Medical Association PAC**

Mailing Address 25 Massachusetts Ave NW  
Ste 600

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00000422**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

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

**Transaction ID : SA11C-CN13730**

Amount of Each Receipt this Period  
**2500**

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

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

**5750.00**



**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 97 OF 152
	<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)  
**Friends of Dave Brat Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**American's First PAC**

Mailing Address PO Box 26141

City Alexandria State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C** C00524314

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

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

**Transaction ID : SA11C-CN13119**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Boehringer Ingelheim PAC**

Mailing Address 1120 G Street NW Ste 1050

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00420398

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

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

**Transaction ID : SA11C-CN13599**

Amount of Each Receipt this Period  
 1000

**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

2115.39

**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 98 OF 152		
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 10000 W Broad St		Amount of Each Disbursement this Period 12.00
City Glen Allen	State VA	
Zip Code 23060	Purpose of Disbursement Bank Fee	<b>Transaction ID : SB17-EX960</b>
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)	Bank Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 10000 W Broad St		Amount of Each Disbursement this Period 228.72
City Glen Allen	State VA	
Zip Code 23060	Purpose of Disbursement Bank Fee	<b>Transaction ID : SB17-EX961</b>
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)	Bank Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 10000 W Broad St		Amount of Each Disbursement this Period 1079.00
City Glen Allen	State VA	
Zip Code 23060	Purpose of Disbursement Bank Fee	<b>Transaction ID : SB17-EX969</b>
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)	Bank Fee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1319.72
<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 99 OF 152			
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T Corporation</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 10000 W Broad St			Amount of Each Disbursement this Period 647.40
City Glen Allen	State VA	Zip Code 23060	
Purpose of Disbursement Bank Fee	Candidate Name		<b>Transaction ID : SB17-EX1000</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/ Type 001		Bank Fee

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T Corporation</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 10000 W Broad St			Amount of Each Disbursement this Period 100.00
City Glen Allen	State VA	Zip Code 23060	
Purpose of Disbursement Bank Fee	Candidate Name		<b>Transaction ID : SB17-EX1111</b>
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:	Category/ Type 001		Bank Fee

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T Corporation</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 10000 W Broad St			Amount of Each Disbursement this Period 15.00
City Glen Allen	State VA	Zip Code 23060	
Purpose of Disbursement Bank Fee	Candidate Name		<b>Transaction ID : SB17-EX1119</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/ Type 001		Bank Fee

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	762.40
<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 100 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 10000 W Broad St		Amount of Each Disbursement this Period 4,500.00 161.85
City Glen Allen	State VA	
Zip Code 23060	Purpose of Disbursement Bank Fee	Transaction ID : SB17-EX1122
Candidate Name	Category/Type 001	
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)	Bank Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014
Mailing Address 10000 W Broad St		Amount of Each Disbursement this Period 4,500.00 327.68
City Glen Allen	State VA	
Zip Code 23060	Purpose of Disbursement Bank Fee	Transaction ID : SB17-EX1113
Candidate Name	Category/Type 001	
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)	Bank Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Philip Rapp</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 14505 St Stephans Pl		Amount of Each Disbursement this Period 4,000.00 4000.00
City Midlothian	State VA	
Zip Code 23113	Purpose of Disbursement General Campaign Consulting	Transaction ID : SB17-EX1015
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)	General Campaign Consulting
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4489.53
<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 101 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Philip Rapp</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 14505 St Stephans Pl			Amount of Each Disbursement this Period 1285.10
City Midlothian	State VA	Zip Code 23113	Transaction ID : SB17-EX1123
Purpose of Disbursement Reimburse - See Memo		007 Category/ Type	
Candidate Name			Reimburse - See Memo
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. The 201 Bar</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 201 Massachusetts Ave NE			Amount of Each Disbursement this Period 1285.10
City Washington	State DC	Zip Code 20002	Transaction ID : SB17-EX1124
Purpose of Disbursement Food and Beverage		007 Category/ Type	
Candidate Name			[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Philip Rapp</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 14505 St Stephans Pl			Amount of Each Disbursement this Period 2000.00
City Midlothian	State VA	Zip Code 23113	Transaction ID : SB17-EX1070
Purpose of Disbursement General Campaign Consulting		001 Category/ Type	
Candidate Name			General Campaign Consulting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3285.10
<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 102 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Minuteman Press</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 20 / 2014</b>	
Mailing Address 10148 W Broad St Ste 201			Amount of Each Disbursement this Period <b>444.89</b>	
City Glen Allen	State VA	Zip Code 23060	Transaction ID : <b>SB17-EX931</b>	
Purpose of Disbursement Printing		Category/ Type <b>006</b>	Printing	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Minuteman Press</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 01 / 2014</b>	
Mailing Address 10148 W Broad St Ste 201			Amount of Each Disbursement this Period <b>5081.86</b>	
City Glen Allen	State VA	Zip Code 23060	Transaction ID : <b>SB17-EX1006</b>	
Purpose of Disbursement Printing and Postage		Category/ Type <b>003</b>	Printing and Postage	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Minuteman Press</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 10 / 2014</b>	
Mailing Address 10148 W Broad St Ste 201			Amount of Each Disbursement this Period <b>78.97</b>	
City Glen Allen	State VA	Zip Code 23060	Transaction ID : <b>SB17-EX1042</b>	
Purpose of Disbursement Campaign Materials		Category/ Type <b>006</b>	Campaign Materials	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5605.72</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 103 OF 152			
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 4990 Sadler Pl			Amount of Each Disbursement this Period 588.00
City Glen Allen	State VA	Zip Code 23060	
Purpose of Disbursement Postage	Candidate Name		<b>Transaction ID : SB17-EX959</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 001		Postage

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 4990 Sadler Pl			Amount of Each Disbursement this Period 1.61
City Glen Allen	State VA	Zip Code 23060	
Purpose of Disbursement Postage	Candidate Name		<b>Transaction ID : SB17-EX975</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 001		Postage

Full Name (Last, First, Middle Initial) <b>C. United States Postal Service</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 4990 Sadler Pl			Amount of Each Disbursement this Period 245.00
City Glen Allen	State VA	Zip Code 23060	
Purpose of Disbursement Postage	Candidate Name		<b>Transaction ID : SB17-EX1023</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 001		Postage

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	834.61
<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 104 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 4990 Sadler Pl		Amount of Each Disbursement this Period 147.00
City Glen Allen	State VA	
Zip Code 23060	Purpose of Disbursement Postage	<b>Transaction ID : SB17-EX1047</b>
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)	Postage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Marketing Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 3240 Wilson Blvd Ste 202		Amount of Each Disbursement this Period 1448.10
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Robocalls	<b>Transaction ID : SB17-EX929</b>
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)	Robocalls
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Campaign Marketing Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 3240 Wilson Blvd Ste 202		Amount of Each Disbursement this Period 954.53
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Robocalls	<b>Transaction ID : SB17-EX988</b>
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)	Robocalls
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2549.63
<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 105 OF 152			
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Campaign Marketing Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 3240 Wilson Blvd Ste 202		Amount of Each Disbursement this Period 2205.49
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Robocalls	<b>Transaction ID : SB17-EX1030</b>
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)	Robocalls
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Marketing Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2014
Mailing Address 3240 Wilson Blvd Ste 202		Amount of Each Disbursement this Period 100.00
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Robocalls	<b>Transaction ID : SB17-EX1079</b>
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)	Robocalls
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Vanco Services LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 12600 Whitewater Drive Suite 200		Amount of Each Disbursement this Period 844.16
City Hopkins	State MN	
Zip Code 55343	Purpose of Disbursement Processing Fee	<b>Transaction ID : SB17-EX1097</b>
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)	Processing Fee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3149.65
<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 106 OF 152			
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Vanco Services LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 12600 Whitewater Drive Suite 200			Amount of Each Disbursement this Period 233.43
City Hopkins	State MN	Zip Code 55343	Transaction ID : SB17-EX1118
Purpose of Disbursement Processing Fee	Category/Type 001		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Processing Fee
State:	District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Comcast</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address PO Box 3005			Amount of Each Disbursement this Period 332.54
City Southeastern	State PA	Zip Code 19398	Transaction ID : SB17-EX885
Purpose of Disbursement Office Utility	Category/Type 001		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Office Utility
State:	District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Comcast</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address PO Box 3005			Amount of Each Disbursement this Period 123.59
City Southeastern	State PA	Zip Code 19398	Transaction ID : SB17-EX973
Purpose of Disbursement Office Utility	Category/Type 001		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Office Utility
State:	District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	689.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 152			
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address PO Box 3005		Amount of Each Disbursement this Period 556.08
City Southeastern	State PA	Zip Code 19398
Purpose of Disbursement Office Utility	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX974
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)	Office Utility
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2014
Mailing Address PO Box 3005		Amount of Each Disbursement this Period 206.34
City Southeastern	State PA	Zip Code 19398
Purpose of Disbursement Office Utility	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX1043
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)	Office Utility
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 3540 Pump Rd		Amount of Each Disbursement this Period 36.30
City Glen Allen	State VA	Zip Code 23060
Purpose of Disbursement Office Supplies	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX972
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)	Office Supplies
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	798.72
<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 108 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 24 / 2014</b>
Mailing Address 1 ADP Boulevard		Amount of Each Disbursement this Period <b>110.00</b>
City Roseland	State NJ	
Zip Code 07068	Purpose of Disbursement Payroll Fee	<b>Transaction ID : SB17-EX971</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Payroll Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 13 / 2014</b>
Mailing Address 1 ADP Boulevard		Amount of Each Disbursement this Period <b>3305.73</b>
City Roseland	State NJ	
Zip Code 07068	Purpose of Disbursement Payroll Taxes	<b>Transaction ID : SB17-EX1101</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Payroll Taxes
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 13 / 2014</b>
Mailing Address 1 ADP Boulevard		Amount of Each Disbursement this Period <b>8535.77</b>
City Roseland	State NJ	
Zip Code 07068	Purpose of Disbursement Payroll - See Memo	<b>Transaction ID : SB17-EX1102</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Payroll - See Memo
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>11951.50</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 109 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Zachary Werrell</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address PO Box 5094		Amount of Each Disbursement this Period 3919.48
City Glen Allen	State VA	Zip Code 23058
Purpose of Disbursement Payroll - Zachary Werrell	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX1103  [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Brian Gottstein</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address PO Box 5094		Amount of Each Disbursement this Period 4616.29
City Glen Allen	State VA	Zip Code 23058
Purpose of Disbursement Payroll - Brian Gottstein	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX1104  [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014
Mailing Address 1 ADP Boulevard		Amount of Each Disbursement this Period 110.00
City Roseland	State NJ	Zip Code 07068
Purpose of Disbursement Payroll Fee	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX1100  Payroll Fee
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	110.00
<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 110 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Wal-Mart</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 11400 W Broad St		Amount of Each Disbursement this Period 84.65
City Glen Allen	State VA	
Zip Code 23060	Purpose of Disbursement Office Supplies	<b>Transaction ID : SB17-EX894</b>
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)	Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Costco Wholesale</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 9650 W Broad St		Amount of Each Disbursement this Period 112.25
City Richmond	State VA	
Zip Code 23060	Purpose of Disbursement Office Supplies	<b>Transaction ID : SB17-EX893</b>
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)	Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Costco Wholesale</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 9650 W Broad St		Amount of Each Disbursement this Period 39.55
City Richmond	State VA	
Zip Code 23060	Purpose of Disbursement Office Supplies	<b>Transaction ID : SB17-EX979</b>
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)	Office Supplies
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	236.55
<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 111 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Costco Wholesale</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2014</b>
Mailing Address <b>9650 W Broad St</b>		Amount of Each Disbursement this Period <b>265.15</b>
City <b>Richmond</b>	State <b>VA</b>	
Zip Code <b>23060</b>	Purpose of Disbursement <b>Event Refreshments</b>	<b>Transaction ID : SB17-EX1021</b>
Candidate Name	Category/Type <b>003</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Event Refreshments
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Costco Wholesale</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2014</b>
Mailing Address <b>9650 W Broad St</b>		Amount of Each Disbursement this Period <b>21.75</b>
City <b>Richmond</b>	State <b>VA</b>	
Zip Code <b>23060</b>	Purpose of Disbursement <b>Volunteer Refreshments</b>	<b>Transaction ID : SB17-EX1020</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Volunteer Refreshments
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Costco Wholesale</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 03 / 2014</b>
Mailing Address <b>9650 W Broad St</b>		Amount of Each Disbursement this Period <b>27.66</b>
City <b>Richmond</b>	State <b>VA</b>	
Zip Code <b>23060</b>	Purpose of Disbursement <b>Volunteer Refreshments</b>	<b>Transaction ID : SB17-EX1058</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Volunteer Refreshments
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>314.66</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 112 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Costco Wholesale</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 9650 W Broad St		Amount of Each Disbursement this Period 23.93
City Richmond	State VA Zip Code 23060	
Purpose of Disbursement Volunteer Refreshments	Category/Type 001	<b>Transaction ID : SB17-EX1063</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Volunteer Refreshments
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Martins</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 9645 W Broad St		Amount of Each Disbursement this Period 73.06
City Glen Allen	State VA Zip Code 23060	
Purpose of Disbursement Event Refreshments	Category/Type 003	<b>Transaction ID : SB17-EX1018</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Event Refreshments
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Uline</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 12575 Uline Dr		Amount of Each Disbursement this Period 154.76
City Pleasant Prarie	State WI Zip Code 53158	
Purpose of Disbursement Campaign Materials	Category/Type 006	<b>Transaction ID : SB17-EX995</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Campaign Materials
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	251.76
<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 113 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Property Investment Group Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 20 / 2014</b>
Mailing Address <b>PO Box 171</b>		Amount of Each Disbursement this Period <b>175.00</b>
City <b>Midlothian</b>	State <b>VA</b>	
Zip Code <b>23113</b>	Purpose of Disbursement <b>Rent</b>	<b>Transaction ID : SB17-EX941</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Rent</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Property Investment Group Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2014</b>
Mailing Address <b>PO Box 171</b>		Amount of Each Disbursement this Period <b>175.00</b>
City <b>Midlothian</b>	State <b>VA</b>	
Zip Code <b>23113</b>	Purpose of Disbursement <b>Rent</b>	<b>Transaction ID : SB17-EX982</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Rent</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Agliano Group LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 01 / 2014</b>
Mailing Address <b>PO Box 5094</b>		Amount of Each Disbursement this Period <b>4000.00</b>
City <b>Glen Allen</b>	State <b>VA</b>	
Zip Code <b>23058</b>	Purpose of Disbursement <b>Financial Consulting</b>	<b>Transaction ID : SB17-EX1017</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Financial Consulting</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4350.00</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 114 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address PO Box 5029		Amount of Each Disbursement this Period 133.34
City Wallingford State CT Zip Code 06492	Purpose of Disbursement Phone Expense 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)	Transaction ID : SB17-EX987
State: District:	Phone Expense	

Full Name (Last, First, Middle Initial) <b>B. Alison Boyd</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address PO Box 5094		Amount of Each Disbursement this Period 3000.00
City Glen Allen State VA Zip Code 23060	Purpose of Disbursement Administrative Consulting 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)	Transaction ID : SB17-EX1014
State: District:	Administrative Consulting	

Full Name (Last, First, Middle Initial) <b>c. Alison Boyd</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address PO Box 5094		Amount of Each Disbursement this Period 1500.00
City Glen Allen State VA Zip Code 23060	Purpose of Disbursement Administrative Consulting 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)	Transaction ID : SB17-EX1069
State: District:	Administrative Consulting	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4633.34
<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 115 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. MoreInformation.Net LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address PO Box 1198		Amount of Each Disbursement this Period 550.00
City Forest	State VA	Zip Code 24551
Purpose of Disbursement Communications Consulting	Category/ Type 001	
Candidate Name		Transaction ID : <b>SB17-EX1024</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Communications Consulting	

Full Name (Last, First, Middle Initial) <b>B. Best Buy</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 11200 W Broad St		Amount of Each Disbursement this Period 175.28
City Glen Allen	State VA	Zip Code 23060
Purpose of Disbursement Electronic Eqpt and Technical Support	Category/ Type 001	
Candidate Name		Transaction ID : <b>SB17-EX1117</b>
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:	Electronic Eqpt and Technical Support	

Full Name (Last, First, Middle Initial) <b>c. RingCentral Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2014
Mailing Address 1400 Fashion Island Blvd #700		Amount of Each Disbursement this Period 365.40
City San Mateo	State CA	Zip Code 94404
Purpose of Disbursement Phone Expense	Category/ Type 001	
Candidate Name		Transaction ID : <b>SB17-EX945</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Phone Expense	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1090.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 116 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. RingCentral Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 1400 Fashion Island Blvd #700		Amount of Each Disbursement this Period 138.08
City San Mateo State CA Zip Code 94404	Purpose of Disbursement Phone Expense	Transaction ID : SB17-EX1106
Candidate Name	Category/Type 001	Phone Expense
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>B. Sara James</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 28620 Dapper Dan Dr		Amount of Each Disbursement this Period 3000.00
City Fair Oaks Ranch State TX Zip Code 78015	Purpose of Disbursement Communications Consulting	Transaction ID : SB17-EX1012
Candidate Name	Category/Type 001	Communications Consulting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Printing Services Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address PO Box 11103		Amount of Each Disbursement this Period 909.87
City Richmond State VA Zip Code 23230	Purpose of Disbursement Printing Expense	Transaction ID : SB17-EX884
Candidate Name	Category/Type 001	Printing Expense
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4047.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Printing Services Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address PO Box 11103		Amount of Each Disbursement this Period 2083.91
City Richmond	State VA	Zip Code 23230
Purpose of Disbursement Printing Expense	Category/Type 003	
Candidate Name	Transaction ID : SB17-EX998	
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)	Printing Expense
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Printing Services Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address PO Box 11103		Amount of Each Disbursement this Period 979.29
City Richmond	State VA	Zip Code 23230
Purpose of Disbursement Campaign Materials	Category/Type 006	
Candidate Name	Transaction ID : SB17-EX1027	
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)	Campaign Materials
State: District:		

Full Name (Last, First, Middle Initial) <b>c. HB Broad Street LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address PO Box 759013		Amount of Each Disbursement this Period 3135.00
City Baltimore	State MD	Zip Code 21275
Purpose of Disbursement Rent	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX942	
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)	Rent
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6198.20
<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 118 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Tim Edson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2014</b>
Mailing Address <b>4005 Brussels Way</b>		Amount of Each Disbursement this Period <b>3000.00</b>
City <b>Woodbridge</b>	State <b>VA</b>	
Zip Code <b>22192</b>	Purpose of Disbursement <b>General Campaign Consulting</b>	<b>Transaction ID : SB17-EX997</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	General Campaign Consulting
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Tim Edson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 10 / 2014</b>
Mailing Address <b>4005 Brussels Way</b>		Amount of Each Disbursement this Period <b>1269.16</b>
City <b>Woodbridge</b>	State <b>VA</b>	
Zip Code <b>22192</b>	Purpose of Disbursement <b>Reimburse - See Memo</b>	<b>Transaction ID : SB17-EX1037</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Reimburse - See Memo
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Wyndham Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 10 / 2014</b>
Mailing Address <b>1000 Virginia Center Pkwy</b>		Amount of Each Disbursement this Period <b>156.15</b>
City <b>Glen Allen</b>	State <b>VA</b>	
Zip Code <b>23059</b>	Purpose of Disbursement <b>Lodging</b>	<b>Transaction ID : SB17-EX1127</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4269.15</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 119 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Hilton</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 12042 W Broad St		Amount of Each Disbursement this Period 381.83
City Richmond	State VA Zip Code 23233	
Purpose of Disbursement Lodging	Category/Type 001	Transaction ID : SB17-EX1128
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hilton</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 12042 W Broad St		Amount of Each Disbursement this Period 146.72
City Richmond	State VA Zip Code 23233	
Purpose of Disbursement Meals	Category/Type 001	Transaction ID : SB17-EX1129
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capital Ale House</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 4024 Cox Rd		Amount of Each Disbursement this Period 584.46
City Glen Allen	State VA Zip Code 23060	
Purpose of Disbursement Meals	Category/Type 001	Transaction ID : SB17-EX1130
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<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 120 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Lisa Everington</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address PO Box 5094		Amount of Each Disbursement this Period 3000.00
City Glen Allen	State VA	Zip Code 23058
Purpose of Disbursement Administrative Consulting	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX1013
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:	Administrative Consulting	

Full Name (Last, First, Middle Initial) <b>B. Lisa Everington</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address PO Box 5094		Amount of Each Disbursement this Period 1500.00
City Glen Allen	State VA	Zip Code 23058
Purpose of Disbursement Administrative Consulting	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX1068
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:	Administrative Consulting	

Full Name (Last, First, Middle Initial) <b>C. Michael Rubino</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address PO Box 5094		Amount of Each Disbursement this Period 167.04
City Glen Allen	State VA	Zip Code 23058
Purpose of Disbursement Reimburse - See Memo	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX938
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:	Reimburse - See Memo	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4667.04
<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 121 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Ashland Ace Hardware</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 105A N Washington Hwy		Amount of Each Disbursement this Period 82.04
City Ashland	State VA Zip Code 23005	
Purpose of Disbursement GOTV Supplies	Category/Type 001	<b>Transaction ID : SB17-EX939</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> 7350 GOTV Supplies
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Epiphany Professional Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address Art Works Studios & Galleries #1		Amount of Each Disbursement this Period 85.00
City Richmond	State VA Zip Code 23224	
Purpose of Disbursement Event Expense	Category/Type 001	<b>Transaction ID : SB17-EX940</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Event Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Michael Rubino</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address PO Box 5094		Amount of Each Disbursement this Period 4997.02
City Glen Allen	State VA Zip Code 23058	
Purpose of Disbursement Fundraising Consulting	Category/Type 001	<b>Transaction ID : SB17-EX1029</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Fundraising Consulting
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4997.02
<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 122 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Matthew Kagel</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address PO Box 5094		Amount of Each Disbursement this Period 2000.00
City Henrico	State VA	
Zip Code 23058	Purpose of Disbursement Communications Consulting	<b>Transaction ID : SB17-EX1011</b>
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)	Communications Consulting
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Matthew Kagel</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address PO Box 5094		Amount of Each Disbursement this Period 1000.00
City Henrico	State VA	
Zip Code 23058	Purpose of Disbursement Communications Consulting	<b>Transaction ID : SB17-EX1066</b>
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)	Communications Consulting
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Stoneridge Group</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 4400 North Point Pkwy Ste 190		Amount of Each Disbursement this Period 5000.00
City Alpharetta	State GA	
Zip Code 30022	Purpose of Disbursement Advertising Expense	<b>Transaction ID : SB17-EX943</b>
Candidate Name	004 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)	Advertising Expense
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8000.00
<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 123 OF 152			
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Stoneridge Group</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 4400 North Point Pkwy Ste 190		Amount of Each Disbursement this Period 3000.00
City Alpharetta State GA Zip Code 30022	Purpose of Disbursement Fundraising Consulting	Transaction ID : SB17-EX944
Candidate Name	Category/Type 001	Fundraising Consulting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Stoneridge Group</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 4400 North Point Pkwy Ste 190		Amount of Each Disbursement this Period 19.95
City Alpharetta State GA Zip Code 30022	Purpose of Disbursement Website Fee	Transaction ID : SB17-EX1075
Candidate Name	Category/Type 001	Website Fee
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>C. Lee-Curtis Freeman Graves &amp; Hall Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 2105 Jefferson Davis Hwy		Amount of Each Disbursement this Period 383.44
City Fredericksburg State VA Zip Code 22401	Purpose of Disbursement Insurance	Transaction ID : SB17-EX968
Candidate Name	Category/Type 001	Insurance
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3403.39
<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 124 OF 152			
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Julianne Condrey</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014	
Mailing Address 14095 Spring Creek Ln			Amount of Each Disbursement this Period 442.13	
City Doswell	State VA	Zip Code 23047	Transaction ID : SB17-EX993	
Purpose of Disbursement Reimburse - Mileage		Category/ Type 001	Reimburse - Mileage	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Julianne Condrey</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2014	
Mailing Address 14095 Spring Creek Ln			Amount of Each Disbursement this Period 3000.00	
City Doswell	State VA	Zip Code 23047	Transaction ID : SB17-EX1031	
Purpose of Disbursement Fundraising Consulting		Category/ Type 001	Fundraising Consulting	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Julianne Condrey</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014	
Mailing Address 14095 Spring Creek Ln			Amount of Each Disbursement this Period 3072.55	
City Doswell	State VA	Zip Code 23047	Transaction ID : SB17-EX1110	
Purpose of Disbursement Fundraising Consulting		Category/ Type 001	Fundraising Consulting	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6514.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 125 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Julianne Condrey</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 14095 Spring Creek Ln		Amount of Each Disbursement this Period 59.02
City Doswell	State VA	
Zip Code 23047	Purpose of Disbursement Reimburse - Mileage	<b>Transaction ID : SB17-EX1082</b>
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)	Reimburse - Mileage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Elizabeth Walker Green</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 14480 Pinehurst Ln		Amount of Each Disbursement this Period 4000.00
City Ashland	State VA	
Zip Code 23005	Purpose of Disbursement Fundraising Consulting	<b>Transaction ID : SB17-EX1028</b>
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)	Fundraising Consulting
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Elizabeth Walker Green</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 14480 Pinehurst Ln		Amount of Each Disbursement this Period 3778.18
City Ashland	State VA	
Zip Code 23005	Purpose of Disbursement Fundraising Consulting	<b>Transaction ID : SB17-EX1033</b>
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)	Fundraising Consulting
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7837.20
<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 126 OF 152	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Elizabeth Walker Green</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 14480 Pinehurst Ln		Amount of Each Disbursement this Period 358.75
City Ashland	State VA Zip Code 23005	
Purpose of Disbursement Fundraising Consulting	Category/Type 001	<b>Transaction ID : SB17-EX1073</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Fundraising Consulting
State: District:		

Full Name (Last, First, Middle Initial) <b>B. We rVirginia LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 5637 Olde Hartley Way		Amount of Each Disbursement this Period 4000.00
City Glen Allen	State VA Zip Code 23060	
Purpose of Disbursement General Campaign Consulting	Category/Type 001	<b>Transaction ID : SB17-EX1016</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	General Campaign Consulting
State: District:		

Full Name (Last, First, Middle Initial) <b>c. We rVirginia LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 5637 Olde Hartley Way		Amount of Each Disbursement this Period 2000.00
City Glen Allen	State VA Zip Code 23060	
Purpose of Disbursement General Campaign Consulting	Category/Type 001	<b>Transaction ID : SB17-EX1071</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	General Campaign Consulting
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6358.75
<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 127 OF 152			
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Steven Mond</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 13400 Crandall Ct		Amount of Each Disbursement this Period 2000.00
City Richmond	State VA	Zip Code 23233
Purpose of Disbursement Technical Consulting	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX1009
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Steven Mond</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 13400 Crandall Ct		Amount of Each Disbursement this Period 1000.00
City Richmond	State VA	Zip Code 23233
Purpose of Disbursement Technical Consulting	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX1067
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lisa Kyle</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address PO Box 504		Amount of Each Disbursement this Period 3500.00
City Glen Allen	State VA	Zip Code 23058
Purpose of Disbursement GOTV Consulting	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX1010
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6500.00
<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 128 OF 152			
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Brian Gottstein</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address PO Box 5094			Amount of Each Disbursement this Period 320.32
City Glen Allen	State VA	Zip Code 23058	Transaction ID : <b>SB17-EX1003</b>
Purpose of Disbursement Reimburse - Mileage		Category/ Type 001	
Candidate Name			Reimburse - Mileage
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 4531 S Laburnum Ave			Amount of Each Disbursement this Period 20.62
City Richmond	State VA	Zip Code 23231	Transaction ID : <b>SB17-EX895</b>
Purpose of Disbursement Office Supplies		Category/ Type 001	
Candidate Name			Office Supplies
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Office Max</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 4531 S Laburnum Ave			Amount of Each Disbursement this Period 56.82
City Richmond	State VA	Zip Code 23231	Transaction ID : <b>SB17-EX964</b>
Purpose of Disbursement Office Supplies		Category/ Type 001	
Candidate Name			Office Supplies
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	397.76
<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 129 OF 152			
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. David Guertler</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 4120 Old Gun Rd E			Amount of Each Disbursement this Period 82.88
City Midlothian	State VA	Zip Code 23113	Transaction ID : <b>SB17-EX1002</b>
Purpose of Disbursement Reimburse - Mileage	Category/ Type 001		
Candidate Name			Reimburse - Mileage
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Google Services</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 1600 Amphitheatre Parkway			Amount of Each Disbursement this Period 158.06
City Mountain View	State CA	Zip Code 94043	Transaction ID : <b>SB17-EX1046</b>
Purpose of Disbursement Technical Support	Category/ Type 001		
Candidate Name			Technical Support
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. American Viewpoint Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 300 North Lee St			Amount of Each Disbursement this Period 11500.00
City Alexandria	State VA	Zip Code 22314	Transaction ID : <b>SB17-EX948</b>
Purpose of Disbursement Polling Expense	Category/ Type 001		
Candidate Name			Polling Expense
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11740.94
<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 130 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. The Commonwealth Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2014
Mailing Address 401 West Franklin St		Amount of Each Disbursement this Period 5210.31
City Richmond	State VA	Zip Code 23220
Purpose of Disbursement Food and Beverage and Room Rental	Category/Type 003	Transaction ID : SB17-EX930
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:	Food and Beverage and Room Rental

Full Name (Last, First, Middle Initial) <b>B. Mrs Suzanne Ircink</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 6609 Sunrise Bay Dr		Amount of Each Disbursement this Period 145.89
City Mineral	State VA	Zip Code 23117
Purpose of Disbursement See Memo - Reimburse	Category/Type 001	Transaction ID : SB17-EX933
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:	See Memo - Reimburse

Full Name (Last, First, Middle Initial) <b>c. Krispy Kreme Doughnuts</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 1891 Carl D Silver Pkw		Amount of Each Disbursement this Period 26.61
City Fredericksburg	State VA	Zip Code 22401
Purpose of Disbursement Volunteer Refreshments	Category/Type 001	Transaction ID : SB17-EX934
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5356.20
<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 131 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Costco Wholesale</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 9650 W Broad St		Amount of Each Disbursement this Period 98.29
City Richmond	State VA Zip Code 23060	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : SB17-EX935 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wal-Mart</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 11400 W Broad St		Amount of Each Disbursement this Period 45.82
City Glen Allen	State VA Zip Code 23060	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : SB17-EX937 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mrs Suzanne Ircink</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 6609 Sunrise Bay Dr		Amount of Each Disbursement this Period 98.29
City Mineral	State VA Zip Code 23117	
Purpose of Disbursement See Memo - Reimburse	Category/Type 001	Transaction ID : SB17-EX989 See Memo - Reimburse
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	98.29
<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 132 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Sheetz</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 2053 Huguenot Rd		Amount of Each Disbursement this Period 36.65
City N Chesterfield	State VA	
Zip Code 23235	Purpose of Disbursement Gas	Transaction ID : SB17-EX990 <b>[MEMO ITEM]</b>
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) <b>B. Exxon</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 11600 Midlothian Tnpk		Amount of Each Disbursement this Period 56.56
City Midlothian	State VA	
Zip Code 23113	Purpose of Disbursement Gas	Transaction ID : SB17-EX991 <b>[MEMO ITEM]</b>
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) <b>c. Wal-Mart</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 11400 W Broad St		Amount of Each Disbursement this Period 5.08
City Glen Allen	State VA	
Zip Code 23060	Purpose of Disbursement Volunteer Refreshments	Transaction ID : SB17-EX992 <b>[MEMO ITEM]</b>
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:		

<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 133 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Mrs Suzanne Ircink</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 6609 Sunrise Bay Dr		Amount of Each Disbursement this Period 144.20
City Mineral	State VA Zip Code 23117	
Purpose of Disbursement Reimburse - See Memo	Category/Type 001	Transaction ID : SB17-EX1083
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)	Reimburse - See Memo
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wawa</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 10626 Courthouse Rd		Amount of Each Disbursement this Period 88.25
City Fredericksburg	State VA Zip Code 22407	
Purpose of Disbursement Travel	Category/Type 001	Transaction ID : SB17-EX1084
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. El Charro</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 4611 Southpoint Pkw		Amount of Each Disbursement this Period 46.00
City Fredericksburg	State VA Zip Code 22407	
Purpose of Disbursement Volunteer Refreshments	Category/Type 001	Transaction ID : SB17-EX1085
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	144.20
<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 134 OF 152			
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. McDonald's</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 545 Ferry Rd		Amount of Each Disbursement this Period 9.95
City Fredericksburg	State VA	Zip Code 22405
Purpose of Disbursement Volunteer Refreshments	Category/ Type 001	
Candidate Name		<b>Transaction ID : SB17-EX1086</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>B. Dominion Virginia Power</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address PO Box 26543		Amount of Each Disbursement this Period 272.44
City Richmond	State VA	Zip Code 23290
Purpose of Disbursement Office Utility	Category/ Type 001	
Candidate Name		<b>Transaction ID : SB17-EX1004</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Office Utility	

Full Name (Last, First, Middle Initial) <b>c. Political Equity Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 3213 Duke St #685		Amount of Each Disbursement this Period 6200.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Fundraising Consulting	Category/ Type 001	
Candidate Name		<b>Transaction ID : SB17-EX1032</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Fundraising Consulting	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6472.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 135 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address PO Box 660720		Amount of Each Disbursement this Period 723.39
City Dallas	State TX	Zip Code 75266
Purpose of Disbursement Office Utility	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX1025	
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)	Office Utility
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Advanced Visual Production</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 8592 Sanford Dr		Amount of Each Disbursement this Period 172.00
City Richmond	State VA	Zip Code 23228
Purpose of Disbursement A/V Equipment Rental	Category/ Type 003	
Candidate Name	Transaction ID : SB17-EX996	
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)	A/V Equipment Rental
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Electronic Systems Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 369 Edwin Dr		Amount of Each Disbursement this Period 56.88
City Virginia Beach	State VA	Zip Code 23462
Purpose of Disbursement Printing Expense	Category/ Type 001	
Candidate Name	Transaction ID : SB17-EX1074	
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)	Printing Expense
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	952.27
<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 136 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Amazon</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 17 / 2014</b>
Mailing Address Online Company		Amount of Each Disbursement this Period <b>20.95</b>
City <b>Seattle</b>	State <b>WA</b>	Zip Code <b>98144</b>
Purpose of Disbursement <b>Office Supplies</b>	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : SB17-EX946</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Office Supplies
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Targeted Creative Communications Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2014</b>
Mailing Address <b>106 S Columbus St</b>		Amount of Each Disbursement this Period <b>2584.00</b>
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314</b>
Purpose of Disbursement <b>Campaign Materials</b>	Category/Type <b>006</b>	
Candidate Name		<b>Transaction ID : SB17-EX994</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Campaign Materials
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mr Major Mansfield</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 16 / 2014</b>
Mailing Address <b>8123 Twin Creek Trail</b>		Amount of Each Disbursement this Period <b>135.52</b>
City <b>Mechanicsville</b>	State <b>VA</b>	Zip Code <b>23111</b>
Purpose of Disbursement <b>Reimburse - See Memo</b>	Category/Type <b>006</b>	
Candidate Name		<b>Transaction ID : SB17-EX888</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Reimburse - See Memo
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2740.47</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 137 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Agri VA Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 3001 Normandy Dr		Amount of Each Disbursement this Period 135.52
City Petersburg	State VA	Zip Code 23805
Purpose of Disbursement GOTV Supplies	Category/Type 006	
Candidate Name	Transaction ID : SB17-EX957	
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:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. American Rising LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 1555 Wilson Blvd Ste 307		Amount of Each Disbursement this Period 2500.00
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement Tracking Services	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX1088	
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:	Tracking Services	

Full Name (Last, First, Middle Initial) <b>c. LensRentals.com</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 7730 Trinity Rd Suite 110		Amount of Each Disbursement this Period 222.53
City Cordova	State TN	Zip Code 38018
Purpose of Disbursement Technical Equipment Rental	Category/Type 007	
Candidate Name	Transaction ID : SB17-EX1056	
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:	Technical Equipment Rental	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2722.53
<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 138 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Don Mears Photography</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 1623 West Broad St		Amount of Each Disbursement this Period 263.25
City Richmond	State VA Zip Code 23220	
Purpose of Disbursement Photography	Category/Type 001	<b>Transaction ID : SB17-EX932</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Photography
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Waverly Woods</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 3650 Seagull Bluff Rd		Amount of Each Disbursement this Period 3225.00
City Virginia Beach	State VA Zip Code 23455	
Purpose of Disbursement GOTV Consulting	Category/Type 001	<b>Transaction ID : SB17-EX1001</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	GOTV Consulting
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Strategic Media Services Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 1911 Fort Myer Dr Ste 400		Amount of Each Disbursement this Period 46000.00
City Arlington	State VA Zip Code 22209	
Purpose of Disbursement Advertising Expense	Category/Type 004	<b>Transaction ID : SB17-EX886</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Advertising Expense
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	49488.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 139 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Strategic Media Services Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 1911 Fort Myer Dr Ste 400		Amount of Each Disbursement this Period 120745.00
City Arlington	State VA	
Zip Code 22209	Purpose of Disbursement Advertising Expense	<b>Transaction ID : SB17-EX949</b>
Candidate Name	Category/ Type 004	
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)	Advertising Expense
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Strategic Media Services Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 1911 Fort Myer Dr Ste 400		Amount of Each Disbursement this Period 75690.00
City Arlington	State VA	
Zip Code 22209	Purpose of Disbursement Advertising Expense	<b>Transaction ID : SB17-EX980</b>
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)	Advertising Expense
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Ironhorse Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 100 S Railroad Ave		Amount of Each Disbursement this Period 1447.47
City Ashland	State VA	
Zip Code 23005	Purpose of Disbursement Event Refreshments	<b>Transaction ID : SB17-EX890</b>
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)	Event Refreshments
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	197882.47
<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 140 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Hardywood Park Craft Brewery</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 2408 Ownby Ln		Amount of Each Disbursement this Period 687.00
City Richmond	State VA	Zip Code 23220
Purpose of Disbursement Event Refreshments	Category/Type 007	
Candidate Name	Transaction ID : SB17-EX1061	
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)	Event Refreshments
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Outback Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 7917 W Broad St		Amount of Each Disbursement this Period 226.81
City Richmond	State VA	Zip Code 23294
Purpose of Disbursement Food & Beverage	Category/Type 007	
Candidate Name	Transaction ID : SB17-EX923	
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)	Food & Beverage
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ashby Law PLLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 919 Prince St		Amount of Each Disbursement this Period 742.50
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Legal Services	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX927	
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)	Legal Services
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1656.31
<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 141 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. ARISTA Management Group</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 10151 Southpoint Pkwy		Amount of Each Disbursement this Period 277.47
City Fredericksburg	State VA	
Zip Code 22407	Purpose of Disbursement Office Utility	Transaction ID : SB17-EX928
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)	Office Utility
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ARISTA Management Group</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 10151 Southpoint Pkwy		Amount of Each Disbursement this Period 181.10
City Fredericksburg	State VA	
Zip Code 22407	Purpose of Disbursement Office Utility	Transaction ID : SB17-EX1005
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)	Office Utility
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Officer James Price</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address PO Box 90775		Amount of Each Disbursement this Period 210.00
City Richmond	State VA	
Zip Code 23273	Purpose of Disbursement Event Security	Transaction ID : SB17-EX986
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)	Event Security
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	668.57
<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 142 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. The Printing Express LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 21 Warehouse Rd			Amount of Each Disbursement this Period 9295.32
City Harrisonburg	State VA	Zip Code 22801	Transaction ID : SB17-EX1007
Purpose of Disbursement Printing and Postage	Category/Type 006		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Printing and Postage
State:	District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Zach Williams</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address PO Box 5094			Amount of Each Disbursement this Period 1000.00
City Glen Allen	State VA	Zip Code 23058	Transaction ID : SB17-EX1008
Purpose of Disbursement GOTV Consulting	Category/Type 001		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		GOTV Consulting
State:	District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Zach Williams</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address PO Box 5094			Amount of Each Disbursement this Period 500.00
City Glen Allen	State VA	Zip Code 23058	Transaction ID : SB17-EX1072
Purpose of Disbursement GOTV Consulting	Category/Type 001		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		GOTV Consulting
State:	District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10795.32
<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 143 OF 152			
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. M Street Insight LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 3039 M Street MW #3			Amount of Each Disbursement this Period 2500.00
City Washington	State DC	Zip Code 20007	Transaction ID : SB17-EX1040
Purpose of Disbursement Research Consulting		Category/ Type 001	
Candidate Name			Research Consulting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Maggiano's</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 11800 W Broad St Ste 2204			Amount of Each Disbursement this Period 1876.24
City Richmond	State VA	Zip Code 23233	Transaction ID : SB17-EX1034
Purpose of Disbursement Catering Expense		Category/ Type 001	
Candidate Name			Catering Expense
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. Hilton</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 12042 W Broad St			Amount of Each Disbursement this Period 5000.00
City Richmond	State VA	Zip Code 23233	Transaction ID : SB17-EX1035
Purpose of Disbursement Room Rental & Refreshments		Category/ Type 007	
Candidate Name			Room Rental & Refreshments
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9376.24
<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 144 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Hilton</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 12042 W Broad St		Amount of Each Disbursement this Period 10508.13
City Richmond	State VA Zip Code 23233	
Purpose of Disbursement Room Rental & Refreshments	Category/Type 007	<b>Transaction ID : SB17-EX1036</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Room Rental & Refreshments
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Colonial Shooting Academy</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 6020 W Broad St		Amount of Each Disbursement this Period 240.00
City Richmond	State VA Zip Code 23230	
Purpose of Disbursement Event Expense	Category/Type 007	<b>Transaction ID : SB17-EX1038</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Event Expense
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Wytestone Companies</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 4830 Southpoint Dr		Amount of Each Disbursement this Period 349.26
City Fredericksburg	State VA Zip Code 22407	
Purpose of Disbursement Event Supplies	Category/Type 007	<b>Transaction ID : SB17-EX1039</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Event Supplies
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11097.39
<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 145 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Mr David Van Buren</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 700 Worsham Rd		Amount of Each Disbursement this Period 223.55
City N Chesterfield	State VA	
Zip Code 23235	Purpose of Disbursement Reimburse - Mileage	Transaction ID : SB17-EX1041
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)	Reimburse - Mileage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Alexa Legas</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2014
Mailing Address PO Box 5094		Amount of Each Disbursement this Period 1000.00
City Glen Allen	State VA	
Zip Code 23058	Purpose of Disbursement GOTV Consulting	Transaction ID : SB17-EX1080
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)	GOTV Consulting
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Steven Ovaska</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address PO Box 5094		Amount of Each Disbursement this Period 2000.00
City Glen Allen	State VA	
Zip Code 23058	Purpose of Disbursement Communications Consulting	Transaction ID : SB17-EX1081
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)	Communications Consulting
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3223.55
<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 146 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Dorothy Compton Cox</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 13407 Blanton Road		Amount of Each Disbursement this Period 2600.00 <b>Transaction ID : SB17-CN15396</b>
City Ashland State VA Zip Code 23005	Purpose of Disbursement IN-KIND RECEIVED Event Catering	
Candidate Name		In-Kind Received Event Catering
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) General 2014	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Mrs. Dorothy Compton Cox</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 13407 Blanton Road		Amount of Each Disbursement this Period 747.56 <b>Transaction ID : SB17-CN15397</b>
City Ashland State VA Zip Code 23005	Purpose of Disbursement IN-KIND RECEIVED Event Catering	
Candidate Name		In-Kind Received Event Catering
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special General 2014	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Mr. John Alfred Cox</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 13407 Blanton Rd		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17-CN15394</b>
City Ashland State VA Zip Code 23005	Purpose of Disbursement IN-KIND RECEIVED Event Catering	
Candidate Name		In-Kind Received Event Catering
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) General 2014	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5847.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 147 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Mr. John Alfred Cox</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 13407 Blanton Rd		Amount of Each Disbursement this Period 847.56
City Ashland	State VA Zip Code 23005	
Purpose of Disbursement IN-KIND RECEIVED Event Catering		<b>Transaction ID : SB17-CN15395</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special General 2014	In-Kind Received Event Catering
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Mrs. Jeannemarie D Davis</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 2213 Aryness Dr		Amount of Each Disbursement this Period 747.13
City Vienna	State VA Zip Code 22181	
Purpose of Disbursement IN-KIND RECEIVED Event Catering		<b>Transaction ID : SB17-CN15419</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	In-Kind Received Event Catering
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Lisa Snellings Kyle</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 2314 Mountainbrook Drive		Amount of Each Disbursement this Period 359.70
City Henrico	State VA Zip Code 23233	
Purpose of Disbursement IN-KIND RECEIVED Mileage		<b>Transaction ID : SB17-CN15392</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) General 2014	In-Kind Received Mileage
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1954.39
<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 148 OF 152	
	<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)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Lisa Snellings Kyle</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 2314 Mountainbrook Drive		Amount of Each Disbursement this Period 397.49
City State Zip Code Henrico VA 23233	Purpose of Disbursement IN-KIND RECEIVED Volunteer Refreshments	Transaction ID : SB17-CN15393
Candidate Name	Category/Type	In-Kind Received Volunteer Refreshments
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) General 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. Pete Snyder</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 2105 Wakefield Ct		Amount of Each Disbursement this Period 280.74
City State Zip Code Alexandria VA 22307	Purpose of Disbursement IN-KIND RECEIVED Event Catering	Transaction ID : SB17-CN14824
Candidate Name	Category/Type	In-Kind Received Event Catering
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) General 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mr. Ed Raymond Vaughn Jr.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address PO Box 193		Amount of Each Disbursement this Period 2500.00
City State Zip Code Hanover VA 23069	Purpose of Disbursement IN-KIND RECEIVED Event Space Rental & Refreshments	Transaction ID : SB17-CN15275
Candidate Name	Category/Type	In-Kind Received Event Space Rental & Refreshments
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) General 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3178.23
<b>TOTAL</b> This Period (last page this line number only).....	435009.69

**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 149 OF 152			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Mr. Wallace Goodlett</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 4822 Hwy 177			Amount of Each Disbursement this Period 12.00
City Jordan	State AR	Zip Code 72519	
Purpose of Disbursement Contribution Ref to Individual		Candidate Name	Transaction ID : SB20a-CR11
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)		Refund of 10/13/14 Contribution	
State:	District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. Mr. Wallace Goodlett</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 4822 Hwy 177			Amount of Each Disbursement this Period 12.00
City Jordan	State AR	Zip Code 72519	
Purpose of Disbursement Contribution Ref to Individual		Candidate Name	Transaction ID : SB20a-CR13
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)		Refund	
State:	District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. Ms. Victoria Larson</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 3100 Wallaby Trace Suite 706			Amount of Each Disbursement this Period 40.00
City Henrico	State VA	Zip Code 23294	
Purpose of Disbursement Contribution Ref to Individual		Candidate Name	Transaction ID : SB20a-CR8
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)		Refund of 09/21/14 Contribution	
State:	District:	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	64.00
<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 150 OF 152			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Brat Inc.**

Full Name (Last, First, Middle Initial) <b>A. Mr. Jeffrey B True</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2014</b>
Mailing Address 55 Highgate Cir		Amount of Each Disbursement this Period <b>900.00</b>
City Ithaca	State NY Zip Code 14850	
Purpose of Disbursement Contribution Ref to Individual	Candidate Name	<b>Transaction ID : SB20a-CR9</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Refund	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>900.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>964.00</b>

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Friends of Dave Brat Inc.

Transaction ID : SC10-LN2

LOAN SOURCE Full Name (Last, First, Middle Initial)

Paul Brat

[PERSONAL FUNDS]

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
167 Windsor Ct

City State ZIP Code  
Saint Paul MN 55112

[MEMO ITEM]  
MEMO

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2600	.00	2600.00

### TERMS

Date Incurred: M 10 / D 06 / Y 2014  
 Date Due: M 10 / D 05 / Y 2015  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	0.00
<b>TOTALS</b> This Period (last page in this line only).....	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Friends of Dave Brat Inc.

Transaction ID : SC10-LN4

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Paul Brat

[PERSONAL FUNDS]

Election: 2014

Primary  
 General  
 Other (specify) ▼  
Special General 2014

Mailing Address  
167 Windsor Ct

City State ZIP Code  
Saint Paul MN 55112

[MEMO ITEM]  
MEMO

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2400	.00	2400.00

**TERMS**

Date Incurred: M 10 / D 06 / Y 2014  
Date Due: M 10 / D 05 / Y 2015  
Interest Rate: 0.00 % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	[ ] 0.00
<b>TOTALS</b> This Period (last page in this line only).....	[ ] 0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.