

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

GARRET GRAVES FOR CONGRESS

ADDRESS (number and street) PO BOX 64845

Check if different than previously reported. (ACC)

BATON ROUGE LA 70896

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼ C C00558486

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

STATE ▼ DISTRICT LA 06

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 11 / 03 / 2020 in the State of LA

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period 10 / 01 / 2020 through 10 / 14 / 2020

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 SLAUGHTER, CHRISTEL, ,

Signature of Treasurer SLAUGHTER, CHRISTEL, , [Electronically Filed] Date 01 / 19 / 2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
GARRET GRAVES FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	54125.00	1457423.32
(b) Total Contribution Refunds (from Line 20(d))	0.00	20650.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	54125.00	1436773.32
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3497.40	925237.77
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1893.75
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	3497.40	923344.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2240626.11	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

GARRET GRAVES FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	24300.00	652242.00
(ii) Unitemized.....	575.00	9115.51
(iii) TOTAL of contributions from individuals ▶	24875.00	661357.51
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	29250.00	796046.26
(d) The Candidate.....	0.00	19.55
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	54125.00	1457423.32
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	179657.90
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	1893.75
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	17416.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	54125.00	1656390.97

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 29

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3497.40	925237.77
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	4356.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	13650.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	7000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	20650.00
21. OTHER DISBURSEMENTS	0.00	80906.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	3497.40	1031149.77

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2189998.51
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	54125.00
25. SUBTOTAL (add Line 23 and Line 24).....	2244123.51
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3497.40
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2240626.11

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 29	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BALHOFF, WILLIAM, E, ,

Mailing Address 3087 E LAKESHORE DR

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

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

Name of Employer POSTLETHWAITE & NETTERVILLE CPA	Occupation CPA
---	-------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2020

Transaction ID : SA11AI.36877

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BECKSTROM, MARK, W, MR.,

Mailing Address 330 STONEHAVEN DR

City MANDEVILLE	State LA	Zip Code 70471
--------------------	-------------	-------------------

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

Name of Employer OCHSNER HEALTH	Occupation ADMINISTRATION
------------------------------------	------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2020

Transaction ID : SA11AI.36890

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address PO BOX 5716

City KINGWOOD	State TX	Zip Code 77325
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FEC ID number of contributing federal political committee. **C**

Name of Employer ENTERPRISE PRODUCTS	Occupation CO-CEO / CFO
---	----------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2020

Transaction ID : SA11AI.36881

Amount of Each Receipt this Period
2500.00

Memo Item
REFUNDED 12/8/2020

SUBTOTAL of Receipts This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 29	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GABRIEL, EDWARD, , ,

Mailing Address 4801 FOXHALL CRESCENT, NW

City WASHINGTON	State DC	Zip Code 20007
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FEC ID number of contributing federal political committee. **C**

Name of Employer THE GABRIEL COMPANY, LLC	Occupation INTERNATIONAL BUSINESS CONSULTANT
--	---

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2020

Transaction ID : SA11AI.36892

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 1401A WEST PRIEN LAKE RD

City LAKE CHARLES	State LA	Zip Code 70601
----------------------	-------------	-------------------

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

Name of Employer PORT AGGREGATES, INC.	Occupation CEO / CHAIRMAN
---	------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2020

Transaction ID : SA11AI.36878

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 26 NEWCOMB BLVD.

City NEW ORLEANS	State LA	Zip Code 70118
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FEC ID number of contributing federal political committee. **C**

Name of Employer OCHSNER HEALTH SYSTEM	Occupation EVP & SYSTEM COO
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2020

Transaction ID : SA11AI.36884

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3000.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 29
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MCMILLEN, ERIC, , ,
 Mailing Address 15421 CAMPANILE COURT
 City State Zip Code
 BATON ROUGE LA 70810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 OCHSNER - BR REGION HEALTHCARE
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 06 2020
Transaction ID : SA11AI.36887
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
PALMISANO, WESLEY, J, ,
 Mailing Address 1730 TCHOUPITOULAS ST
 City State Zip Code
 NEW ORLEANS LA 70130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PALMISANO CONSTRUCTION
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 01 2020
Transaction ID : SA11AI.36874
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
PATEL, SNEHAL, , ,
 Mailing Address 3011 GRAND WAY AVE
 City State Zip Code
 BATON ROUGE LA 70810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED INVESTOR
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 06 2020
Transaction ID : SA11AI.36891
 Amount of Each Receipt this Period
 3000.00
 Memo Item
 EXCESS REFUNDED 12/8/2020

SUBTOTAL of Receipts This Page (optional)..... ▶ 4500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 29	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
POLITO, MICHAEL, , ,

Mailing Address 344 THIRD ST.

City BATON ROUGE	State LA	Zip Code 70801
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FEC ID number of contributing federal political committee. **C**

Name of Employer MAPP	Occupation CEO
--------------------------	-------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 12 / 2020

Transaction ID : SA11AI.36900

Amount of Each Receipt this Period
1500.00

Memo Item

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

Mailing Address 4425 BLECKER DRIVE

City BATON ROUGE	State LA	Zip Code 70809
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FEC ID number of contributing federal political committee. **C**

Name of Employer OCHSNER	Occupation EXECUTIVE
-----------------------------	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2020

Transaction ID : SA11AI.36880

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RUSSO, ALDO, J, ,

Mailing Address 16826 WHITE SPRINGS AVENUE

City BATON ROUGE	State LA	Zip Code 70816
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FEC ID number of contributing federal political committee. **C**

Name of Employer OCHSNER	Occupation PHYSICIAN
-----------------------------	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2020

Transaction ID : SA11AI.36883

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3500.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 29	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SAAB, GHASSAN, M, ,

Mailing Address 111 E COURT STR, 1-C

City FLINT	State MI	Zip Code 48502
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FEC ID number of contributing federal political committee. **C**

Name of Employer SORENSEN GROSS	Occupation EXECUTIVE
------------------------------------	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 01 / 2020

Transaction ID : SA11AI.36876

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SMITH, CLARK, C, ,

Mailing Address 366 TYNEBRIDGE LN

City HOUSTON	State TX	Zip Code 77024
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FEC ID number of contributing federal political committee. **C**

Name of Employer BUCKEYE PARTNERS LP	Occupation CEO
---	-------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2020

Transaction ID : SA11AI.36889

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TAYLOR, STEPHEN, , MR.,

Mailing Address 17919 CROSSING BOULEVARD

City BATON ROUGE	State LA	Zip Code 70810
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FEC ID number of contributing federal political committee. **C**

Name of Employer MORGAN STANLEY	Occupation PORTFOLIO MANAGER
------------------------------------	---------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 09 / 2020

Transaction ID : SA11AI.36899

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	2250.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 29	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS, WARNER, L, MR.,

Mailing Address 1514 JEFFERSON HIGHWAY

City NEW ORLEANS	State LA	Zip Code 70121
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FEC ID number of contributing federal political committee. **C**

Name of Employer OCHSNER HEALTH SYSTEM	Occupation PRESIDENT AND CEO
---	---------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2020

Transaction ID : SA11AI.36885

Amount of Each Receipt this Period
2800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
VAUGHAN, KATHERINE, G, MS.,

Mailing Address 211 DUTCH HIGHLAND LANE

City BATON ROUGE	State LA	Zip Code 70810-4013
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2020

Transaction ID : SA11AI.36905

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WILSON, PETER, A, MR.,

Mailing Address 507 W. 20TH AVE.

City COVINGTON	State LA	Zip Code 70433
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FEC ID number of contributing federal political committee. **C**

Name of Employer BARRIERE CONSTRUCTION CO.	Occupation EXECUTIVE
---	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 07 / 2020

Transaction ID : SA11AI.36894

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	5550.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 11 OF 29	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
210.08

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2020

Transaction ID : SA11AI.36835

Amount of Each Receipt this Period
18.94

Memo Item
TOTAL EARMARKED THROUGH CONDUIT: PAC
LIMIT NOT AFFECTED: NO ITEMIZATION REQUIRED

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

Mailing Address 215 SE 8TH AVENUE
APT 1860

City FORT LAUDERDALE	State FL	Zip Code 33301
-------------------------	-------------	-------------------

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

Name of Employer ZIEBART CONSULTING INC	Occupation CONSULTANT
--	--------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 07 / 2020

Transaction ID : SA11AI.36893

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address

City	State	Zip Code
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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

Memo Item

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

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

1000.00
24300.00

**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 29	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AECOM PAC

Mailing Address 2000 K ST., NW #800

City WASHINGTON	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C** C00374447

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2020

Transaction ID : SA11C.36896

Amount of Each Receipt this Period
 _____ 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AIR TRANSPORT SERVICES GROUP, INC. PAC

Mailing Address 145 HUNTER DR.

City WILMINGTON	State OH	Zip Code 45177
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00238311

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2020

Transaction ID : SA11C.36932

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILD PAC)

Mailing Address 1201 15TH STREET, NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00000901

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2020

Transaction ID : SA11C.36917

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 5000.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 13 OF 29
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CLEARWAY ENERGY GROUP LLC PAC

Mailing Address 100 CALIFORNIA ST.
FLOOR 4

City State Zip Code
SAN FRANCISCO CA 94111

FEC ID number of contributing federal political committee. **C** C00708180

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 14 2020

Transaction ID : SA11C.36922

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CSX CORPORATION GOOD GOVERNMENT FUND

Mailing Address 1331 PENNSYLVANIA AVE. NW STE 560

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 14 2020

Transaction ID : SA11C.36920

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DALE M ERDEY CAMPAIGN ACCOUNT

Mailing Address PO BOX 400

City State Zip Code
LIVINGSTON LA 70754

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 14 2020

Transaction ID : SA11C.36934

Amount of Each Receipt this Period
250.00

Memo Item

PERMISSIBLE FUNDS

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 29	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DRILLERSPAC, A POLITICAL ACTION COMMITTEE OF THE INTERNATIONAL ASSOCIATION OF DRILLING CON

Mailing Address 3657 BRIARPARK DR.
SUITE 200

City HOUSTON	State TX	Zip Code 77042
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00635706

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2020

Transaction ID : SA11C.36927

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DTE ENERGY COMPANY POLITICAL ACTION COMMITTEE

Mailing Address ONE ENERGY PLAZA
ROOM 1583 WCB

City DETROIT	State MI	Zip Code 48226
-----------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2020

Transaction ID : SA11C.36916

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address PO BOX 2008

City LITTLE ROCK	State AR	Zip Code 72203
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00448373

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2020

Transaction ID : SA11C.36924

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	9500.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 29
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00238725

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2020

Transaction ID : SA11C.36928

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO	State IL	Zip Code 60611
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00030718

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 09 / 2020

Transaction ID : SA11C.36895

Amount of Each Receipt this Period
3000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL PRO-LIFE ALLIANCE PAC

Mailing Address 5211 PORT ROYAL ROAD
SUITE 500

City SPRINGFIELD	State VA	Zip Code 22151
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00358051

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2020

Transaction ID : SA11C.36925

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	5000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 29
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SQUIRE PATTON BOGGS POLITICAL ACTION COMMITTEE (SQUIRE PATTON BOGGS PAC)

Mailing Address 2550 M STREET N.W.

City WASHINGTON	State DC	Zip Code 20037
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401083

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2020

Transaction ID : SA11C.36919

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TRINITY INDUSTRIES EMPLOYEE POLITICAL ACTION COMMITTEE (SF) INC.

Mailing Address 2525 N. STEMMONS FREEWAY

City DALLAS	State TX	Zip Code 75207
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00268904

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2020

Transaction ID : SA11C.36912

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 700 13TH STREET NW, SUITE 350

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00010470

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2020

Transaction ID : SA11C.36914

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	4000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 29	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
VAN NESS FELDMAN, LLP POLITICAL ACTION COMMITTEE

Mailing Address 1050 THOMAS JEFFERSON STREET, NW

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00205369

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2020

Transaction ID : SA11C.36930

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WALMART INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 S.W. 8TH STREET

City BENTONVILLE	State AR	Zip Code 72716
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00093054

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 14 / 2020

Transaction ID : SA11C.36910

Amount of Each Receipt this Period
2000.00

Memo Item

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

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	29250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADOBE			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2020	
Mailing Address 801 N 34TH ST			FEC Identification Number C	
City SEATTLE	State WA	Zip Code 98103	Amount of Each Disbursement this Period 29.99	
Purpose of Disbursement SOFTWARE [SB17.36836]		Category/Type	Transaction ID : SB17.36867	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ADOBE			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2020	
Mailing Address 801 N 34TH ST			FEC Identification Number C	
City SEATTLE	State WA	Zip Code 98103	Amount of Each Disbursement this Period 56.30	
Purpose of Disbursement SOFTWARE [SB17.36836]		Category/Type	Transaction ID : SB17.36864	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2020	
Mailing Address 200 VESEY ST			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10285-3106	Amount of Each Disbursement this Period 2202.37	
Purpose of Disbursement CREDIT CARD PAYMENT: SEE ITEMIZATION IF REQUIRED		Category/Type	Transaction ID : SB17.36836	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2202.37
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 29			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. APEX			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2020		
Mailing Address 138 CONANT STREET 2ND FLOOR			FEC Identification Number C		
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 298.00		
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.36837		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. APEX			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2020		
Mailing Address 138 CONANT STREET 2ND FLOOR			FEC Identification Number C		
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 32.00		
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.36838		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. APEX			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2020		
Mailing Address 138 CONANT STREET 2ND FLOOR			FEC Identification Number C		
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 80.00		
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.36839		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	410.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. APEX			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2020	
Mailing Address 138 CONANT STREET 2ND FLOOR			FEC Identification Number C	
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 80.00	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.36840	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. APEX			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2020	
Mailing Address 138 CONANT STREET 2ND FLOOR			FEC Identification Number C	
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 432.00	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.36841	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. APEX			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2020	
Mailing Address 138 CONANT STREET 2ND FLOOR			FEC Identification Number C	
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.36842	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	812.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. APEX			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2020	
Mailing Address 138 CONANT STREET 2ND FLOOR			FEC Identification Number C	
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 71.40	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.36843	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. AT&T			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2020	
Mailing Address 11950 SW GARDEN PL			FEC Identification Number C	
City PORTLAND	State OR	Zip Code 97223	Amount of Each Disbursement this Period 53.49	
Purpose of Disbursement MOBILE PHONE EXPENSE [SB17.36836]		Category/ Type	Transaction ID : SB17.36863	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. AT&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2020	
Mailing Address 11950 SW GARDEN PL			FEC Identification Number C	
City PORTLAND	State OR	Zip Code 97223	Amount of Each Disbursement this Period 74.76	
Purpose of Disbursement MOBILE PHONE EXPENSE [SB17.36836]		Category/ Type	Transaction ID : SB17.36861	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	71.40
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2020	
Mailing Address 11950 SW GARDEN PL			FEC Identification Number C	
City PORTLAND	State OR	Zip Code 97223	Amount of Each Disbursement this Period 42.98	
Purpose of Disbursement MOBILE PHONE EXPENSE [SB17.36836]		Category/ Type	Transaction ID : SB17.36855	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. CANVA			Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2020	
Mailing Address 2140 S DUPONT HIGHWAY			FEC Identification Number C	
City CAMDEN	State DE	Zip Code 19934	Amount of Each Disbursement this Period 24.95	
Purpose of Disbursement PRINTING AND DESIGN SERVICES [SB17.36836]		Category/ Type	Transaction ID : SB17.36870	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. DIGIULIO BROTHERS ITALIAN CAFE			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2020	
Mailing Address 2903 PERKINS RD			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70808-2249	Amount of Each Disbursement this Period 244.73	
Purpose of Disbursement MEETING EXPENSE: MEALS [SB17.36836]		Category/ Type	Transaction ID : SB17.36872	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GODADDY			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2020	
Mailing Address 14455 N HAYDEN RD			FEC Identification Number C	
City SCOTTSDALE	State AZ	Zip Code 85260-6993	Amount of Each Disbursement this Period 119.88	
Purpose of Disbursement WEB HOSTING [SB17.36836]		Category/Type	Transaction ID : SB17.36868	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. GOGOAIR			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2020	
Mailing Address 111 N CANAL ST SUITE 1500			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60606	Amount of Each Disbursement this Period 49.95	
Purpose of Disbursement TRAVEL: FEES [SB17.36836]		Category/Type	Transaction ID : SB17.36853	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. GOOGLE			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2020	
Mailing Address 1600 AMPHITHEATRE PKWY			FEC Identification Number C	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 9.99	
Purpose of Disbursement EMAIL SERVICES [SB17.36836]		Category/Type	Transaction ID : SB17.36869	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GOOGLE			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2020	
Mailing Address 1600 AMPHITHEATRE PKWY			FEC Identification Number C	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 6.00	
Purpose of Disbursement EMAIL SERVICES [SB17.36836]			Transaction ID : SB17.36862	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. GOOGLE			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2020	
Mailing Address 1600 AMPHITHEATRE PKWY			FEC Identification Number C	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 12.00	
Purpose of Disbursement EMAIL SERVICES [SB17.36836]			Transaction ID : SB17.36857	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. GOOGLE			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2020	
Mailing Address 1600 AMPHITHEATRE PKWY			FEC Identification Number C	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 72.00	
Purpose of Disbursement EMAIL SERVICES [SB17.36836]			Transaction ID : SB17.36858	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GOOGLE			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2020	
Mailing Address 1600 AMPHITHEATRE PKWY			FEC Identification Number C	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Amount of Each Disbursement this Period 18.00	
Purpose of Disbursement EMAIL SERVICES [SB17.36836]		Category/Type	Transaction ID : SB17.36859	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. LOWE'S			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2020	
Mailing Address 1130 E LANDRY ST			FEC Identification Number C	
City OPELOUSAS	State LA	Zip Code 70570-7354	Amount of Each Disbursement this Period 177.73	
Purpose of Disbursement EVENT EXPENSE: SUPPLIES [SB17.36836]		Category/Type	Transaction ID : SB17.36846	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. MAILCHIMP			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2020	
Mailing Address 675 PONCE DE LEON AVE NE STE 500			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30308	Amount of Each Disbursement this Period 188.10	
Purpose of Disbursement EMAIL SERVICES [SB17.36836]		Category/Type	Transaction ID : SB17.36865	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MIKE ANDERSON'S SEAFOOD			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2020	
Mailing Address 1500 LOUISIANA 30 WEST			FEC Identification Number C	
City GONZALES	State LA	Zip Code 70737	Amount of Each Disbursement this Period 90.00	
Purpose of Disbursement MEETING EXPENSE: MEALS [SB17.36836]			Transaction ID : SB17.36847	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2020	
Mailing Address 3116 COLLEGE DR			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70808	Amount of Each Disbursement this Period 329.84	
Purpose of Disbursement OFFICE SUPPLIES [SB17.36836]			Transaction ID : SB17.36849	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. PORTOBELLOS GRILL			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2020	
Mailing Address 7622 OLD HAMMOND HWY			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70809-1221	Amount of Each Disbursement this Period 74.12	
Purpose of Disbursement TRAVEL: FOOD [SB17.36836]			Transaction ID : SB17.36851	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. POTBELLY SANDWICH SHOP			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2020	
Mailing Address 2401 S SMITH BLVD			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22202	Amount of Each Disbursement this Period 60.40	
Purpose of Disbursement TRAVEL: FOOD [SB17.36836]		Category/Type	Transaction ID : SB17.36854	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. STOR-IT MINI WAREHOUSES			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2020	
Mailing Address 3147 COLLEGE DRIVE			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70808	Amount of Each Disbursement this Period 103.18	
Purpose of Disbursement STORAGE RENTAL [SB17.36836]		Category/Type	Transaction ID : SB17.36860	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. SUSHI YAMA JAPANESE RESTAURANT			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2020	
Mailing Address 7731 PERKINS RD #120			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70810	Amount of Each Disbursement this Period 130.85	
Purpose of Disbursement MEETING EXPENSE: MEALS [SB17.36836]		Category/Type	Transaction ID : SB17.36852	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UBERCONFERENCE			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2020	
Mailing Address 275 SACRAMENTO STREET 4TH FLOOR			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94111	Amount of Each Disbursement this Period 10.35	
Purpose of Disbursement TELECONFERENCE FEE [SB17.36836]			Transaction ID : SB17.36856	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WALMART			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2020	
Mailing Address 9700 NW 112 AVE			FEC Identification Number C	
City MEDLEY	State FL	Zip Code 33178	Amount of Each Disbursement this Period 32.66	
Purpose of Disbursement OFFICE SUPPLIES [SB17.36836]			Transaction ID : SB17.36848	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	3495.77

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 29	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
GARRET GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NATIONAL MULTIPLE SCLEROSIS SOCIETY			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2020	
Mailing Address 733 THIRD AVENUE			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10017	Amount of Each Disbursement this Period 106.00	
Purpose of Disbursement CHARITABLE CONTRIBUTION [SB17.36836]			Transaction ID : SB21.36951	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	0.00