

**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

2. **FEC IDENTIFICATION NUMBER** ▼ C C00558486 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY ▲ STATE ▲ ZIP CODE ▲ 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 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 in the State of  

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2016 through M M / D D / Y Y Y Y 03 / 31 / 2016

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 CHRISTEL SLAUGHTER

Signature of Treasurer CHRISTEL SLAUGHTER [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 15 / 2016

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**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))....	250851.28	1006547.47
(b) Total Contribution Refunds (from Line 20(d)) .....	3700.00	14550.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	247151.28	991997.47
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	116021.73	660250.68
(b) Total Offsets to Operating Expenditures (from Line 14).....	126.31	1925.51
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	115895.42	658325.17
8. Cash on Hand at Close of Reporting Period (from Line 27).....	814864.53	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**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).....	154242.63	501797.99
(ii) Unitemized.....	574.40	6965.23
(iii) TOTAL of contributions from individuals ▶	154817.03	508763.22
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	96034.25	497784.25
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	250851.28	1006547.47
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
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.) .....	126.31	1925.51
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	900.00	900.00
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	251877.59	1009372.98

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	116021.73	660250.68
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	3700.00	6300.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	8250.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	3700.00	14550.00
21. OTHER DISBURSEMENTS .....	0.00	84800.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	119721.73	759600.68

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	682708.67
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	251877.59
25. SUBTOTAL (add Line 23 and Line 24).....	934586.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	119721.73
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	814864.53

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS J ADAMEK**

Mailing Address 6113 CHANDLER DRIVE

City State Zip Code  
BATON ROUGE LA 70808

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
STONEHENGE CAPITAL PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18347**

Amount of Each Receipt this Period

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SYED S AHMAD**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18724**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18725**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 6 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KENNETH J ALCOTT**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11Al.18726**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**MR. ANTHONY ALFORD**

Mailing Address **225 OUISKI BAYOU DRIVE**

City **HOUMA** State **LA** Zip Code **70360**

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

Name of Employer **ALFORD, STAPLES, LAPEYRE, & ROBICH** Occupation **INSURANCE EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2016**

**Transaction ID : SA11Al.18524**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **2700.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GLENDA ALFORD**

Mailing Address **225 OUISKI BAYOU DRIVE**

City **HOUMA** State **LA** Zip Code **70360**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2016**

**Transaction ID : SA11Al.18525**

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

Memo Item  
**SEE REDESIGNATION**

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

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

\_\_\_\_\_ **3700.00**

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GLENDAL ALFORD**

Mailing Address 225 OUISKI BAYOU DRIVE

City HOUMA State LA Zip Code 70360

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2016**

**Transaction ID : SA11AI.18525.0**

Amount of Each Receipt this Period  
**-300.00**

Memo Item  
**REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**GLENDAL ALFORD**

Mailing Address 225 OUISKI BAYOU DRIVE

City HOUMA State LA Zip Code 70360

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2016**

**Transaction ID : SA11AI.18525.1**

Amount of Each Receipt this Period  
**300.00**

Memo Item  
**REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**WALTER J ANDREWS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18727**

Amount of Each Receipt this Period  
**4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

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

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

**0.00**

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. CORNEL J ARCENEAUX**

Mailing Address 6950 S FIELDGATE CT

City State Zip Code  
BATON ROUGE LA 70808

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

Name of Employer Occupation  
INSURANCE DESIGNERS OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11AI.18388**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ASSOCIATED TERMINAL, L.L.C.**

Mailing Address 9100 SAFETY DRIVE

City State Zip Code  
CONVENT LA 70723

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11AI.18662**

Amount of Each Receipt this Period  
1000.00

Memo Item  
PERMISSIBLE FUNDS: SEE ATTRIBUTIONS

**C.** Full Name (Last, First, Middle Initial)  
**DAVID FENNELLY**

Mailing Address 9100 SAFETY DRIVE

City State Zip Code  
CONVENT LA 70723

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

Name of Employer Occupation  
ASSOCIATED TERMINALS DIRECTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11AI.18662.0**

Amount of Each Receipt this Period  
850.00

Memo Item  
PERMISSIBLE FUNDS: ASSOCIATED TERMINAL, L.L.C.

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

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

2000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 210
	<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	

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)  
**L. SCOTT AUSTIN**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11Al.18728**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**JARRET E BAUER**

Mailing Address **5217 JANICE AVE**

City **KENNER** State **LA** Zip Code **70065**

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

Name of Employer **ALL SOUTH CONSULTING ENGINEERS** Occupation **CIVIL ENGINEER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2016**

**Transaction ID : SA11Al.18441**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOHN J BEARDSWORTH JR**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11Al.18729**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**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 10 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RYAN A BECKER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18730**

Amount of Each Receipt this Period  
4.56

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**STEVEN H BECKER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18731**

Amount of Each Receipt this Period  
4.56

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**KARL BEIER**

Mailing Address 28183 MAIN ST

City LACOMBE State LA Zip Code 70445

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

Name of Employer BEIER RADIO, LLC Occupation OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 23 / 2016

**Transaction ID : SA11AI.18364**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

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

2700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. STEPHEN BENNETT</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18732</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.56		
FEC ID number of contributing federal political committee. C	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 17.17		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. MELINDA R BERES</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18733</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.56		
FEC ID number of contributing federal political committee. C	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.48		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. MARK B BIERBOWER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18734</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.56		
FEC ID number of contributing federal political committee. C	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.48		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 0.00
<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 12 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. JEFFRY M BLAIR</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18735</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.56		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.48		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. ANDREW J BLANCHARD</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18736</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.56		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 17.17		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. DANNY BLANKS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 23 / 2016	
Mailing Address 91 PINEHURST DR		<b>Transaction ID : SA11AI.18435</b>	
City NEW ORLEANS State LA Zip Code 70131	Amount of Each Receipt this Period _____ 2700.00		
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Memo Item SEE REDESIGNATION		
Name of Employer PONTCHARTRAIN PARTNERS, LLC Occupation OWNER	Election Cycle-to-Date _____ 3200.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 2700.00
<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 13 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DANNY BLANKS**

Mailing Address 91 PINEHURST DR

City State Zip Code  
NEW ORLEANS LA 70131

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

Name of Employer Occupation  
PONTCHARTRAIN PARTNERS, LLC OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11AI.18435.0**

Amount of Each Receipt this Period  
-500.00

Memo Item  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**DANNY BLANKS**

Mailing Address 91 PINEHURST DR

City State Zip Code  
NEW ORLEANS LA 70131

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

Name of Employer Occupation  
PONTCHARTRAIN PARTNERS, LLC OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 23 / 2016

**Transaction ID : SA11AI.18435.1**

Amount of Each Receipt this Period  
500.00

Memo Item  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD BOETTNER**

Mailing Address 812 GRAVIER ST  
STE 200

City State Zip Code  
NEW ORLEANS LA 70112

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

Name of Employer Occupation  
HRI PROPERTIES CHIEF ADMINISTRATIVE OFFICER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 23 / 2016

**Transaction ID : SA11AI.18366**

Amount of Each Receipt this Period  
500.00

Memo Item

**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: PAGE 14 OF 210  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JANET S BOLES**

Mailing Address **7323 BOCAGE BOULEVARD**

City **BATON ROUGE** State **LA** Zip Code **70809**

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

Name of Employer **BOLES LAW FIRM** Occupation **LAWYER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
**03 / 14 / 2016**

**Transaction ID : SA11AI.18475**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MATTHEW P BOSHER**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**21.48**

Date of Receipt  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18737**

Amount of Each Receipt this Period  
**4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**C.** Full Name (Last, First, Middle Initial)  
**MR. MARK BOURGEOIS**

Mailing Address **P.O. BOX 975**

City **BOURG** State **LA** Zip Code **70343**

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

Name of Employer **LEBEOUF BROS. TOWING LLC** Occupation **EXECUTIVE VICE PRESIDENT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
**03 / 29 / 2016**

**Transaction ID : SA11AI.18513**

Amount of Each Receipt this Period  
**250.00**

Memo Item

**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 15 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES W BOWEN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18738**

Amount of Each Receipt this Period  
4.56

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**LEVON BOYAGIAN**

Mailing Address 302 N. LINCOLN STREET

City ARLINGTON State VA Zip Code 22201

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

Name of Employer BOYAGIAN CONSULTING Occupation GOVERNMENT RELATIONS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 04 / 2016

**Transaction ID : SA11AI.18443**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JAMES P BRADLEY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
17.17

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18739**

Amount of Each Receipt this Period  
4.56

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 16 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SHELDON T BRADSHAW**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18740**

Amount of Each Receipt this Period  
4.56

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**DAVID F BRANDLEY JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18741**

Amount of Each Receipt this Period  
4.56

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN BREAUX**

Mailing Address 4521 9TH AVE

City Meridian State MS Zip Code 39305-2815

FEC ID number of contributing federal political committee. C

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11AI.18374**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

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

2700.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN B BREAUX**

Mailing Address 2550 M STREET NW

City WASHINGTON State DC Zip Code 20037

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

Name of Employer SQUIRE PATTON BOGGS Occupation SENIOR COUNSEL

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11AI.18376**

Amount of Each Receipt this Period  
 2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MS. JANET S BRITTON**

Mailing Address 2215 S EVERGREEN AVE

City GONZALES State LA Zip Code 70737

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

Name of Employer EATEL Occupation GENERAL COUNSEL

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4134.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2016

**Transaction ID : SA11AI.18423**

Amount of Each Receipt this Period  
 2700.00

Memo Item  
 SEE REDESIGNATION

**C.** Full Name (Last, First, Middle Initial)  
**MS. JANET S BRITTON**

Mailing Address 2215 S EVERGREEN AVE

City GONZALES State LA Zip Code 70737

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

Name of Employer EATEL Occupation GENERAL COUNSEL

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2016

**Transaction ID : SA11AI.18423.0**

Amount of Each Receipt this Period  
 -1434.20

Memo Item  
 REDESIGNATION TO GENERAL

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

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

5400.00

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. JANET S BRITTON**

Mailing Address 2215 S EVERGREEN AVE

City State Zip Code  
GONZALES LA 70737

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

Name of Employer Occupation  
EATEL GENERAL COUNSEL

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4134.20

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

**Transaction ID : SA11A1.18423.1**

Amount of Each Receipt this Period  
1434.20

Memo Item  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**B. JEFFREY BROOKS**

Mailing Address 5625 JAMES GUNNELL LANE

City State Zip Code  
ALEXANDRIA VA 22310

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

Name of Employer Occupation  
ADAMS & REESE, LLP ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 23 / 2016

**Transaction ID : SA11A1.18458**

Amount of Each Receipt this Period  
1200.00

Memo Item  
IN-KIND: EVENT EXPENSE: REFRESHMENTS

**C.** Full Name (Last, First, Middle Initial)  
**MRS. LISA BROOKS**

Mailing Address 5605 JAMES GUNNELL LANE

City State Zip Code  
ALEXANDRIA VA 22310

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 23 / 2016

**Transaction ID : SA11A1.18460**

Amount of Each Receipt this Period  
2700.00

Memo Item  
IN-KIND: EVENT EXPENSE: REFRESHMENTS

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

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

3900.00

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BENJAMIN P BROWDER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18742**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**ANTHONY T BROWN SR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18743**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**MR. J TERRELL BROWN SR.**

Mailing Address 8772 W FAIRWAY

City BATON ROUGE State LA Zip Code 70809

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

Name of Employer GMFS LLC Occupation CHAIRMAN

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : SA11AI.18481**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

Memo Item

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

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

\_\_\_\_\_ 2700.00

\_\_\_\_\_

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TYLER P BROWN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18744**

Amount of Each Receipt this Period

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**F W BROWNELL**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18745**

Amount of Each Receipt this Period

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**BRYCO LAND DEVELOPMENT LLC**

Mailing Address 425 MEADOW VIEW CT

City THIBODAUX State LA Zip Code 70301

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18660**

Amount of Each Receipt this Period

Memo Item  
 PERMISSIBLE FUNDS: SEE ATTRIBUTIONS

**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 21 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BRYAN FONTENOT**

Mailing Address 425 MEADOW VIEW CT

City State Zip Code  
THIBODAUX LA 70301

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
BRYCO LAND DEVELOPMENT LLC OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18660.0**

Amount of Each Receipt this Period

Memo Item  
 PERMISSIBLE FUNDS: BRYCO LAND DEVELOPMENT LLC

**B.** Full Name (Last, First, Middle Initial)  
**KRISTY N BULLEIT**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18746**

Amount of Each Receipt this Period

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**JOSEPH B BUONANNO**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18747**

Amount of Each Receipt this Period

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 22 OF 210			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
	12	13a	13b	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)  
**LUCY ANN BURNETT**

Mailing Address 1000 BOURBON STREET #312

City NEW ORLEANS	State LA	Zip Code 70116
---------------------	-------------	-------------------

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

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

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

**Transaction ID : SA11AI.18391**

Amount of Each Receipt this Period  

1000.00
---------

 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**M B BURNS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND	State VA	Zip Code 23219-4074
------------------	-------------	------------------------

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

Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY
---------------------------------------	------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

**Transaction ID : SA11AI.18748**

Amount of Each Receipt this Period  

4.56
------

 Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**PATRICK S BURTON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND	State VA	Zip Code 23219-4074
------------------	-------------	------------------------

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

Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY
---------------------------------------	------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

**Transaction ID : SA11AI.18749**

Amount of Each Receipt this Period  

4.56
------

 Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 23 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MATTHEW J CALVERT**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18750**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**PAUL F CAMBON**

Mailing Address 908 CROTON DRIVE

City Alexandria State VA Zip Code 22308

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

Name of Employer LIVINGSTON GROUP Occupation GOVERNMENT RELATIONS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11AI.18372**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DANIEL M CAMPBELL**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18751**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 24 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>MR. MARTIN CANCIENNE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2016	
Mailing Address PO BOX 36 7075 HWY 1 SOUTH City State Zip Code BELLE ROSE LA 70341		<b>Transaction ID : SA11AI.18355</b>	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation THE LIVINGSTON GROUP, LLC PARTNER		<input type="checkbox"/> Memo Item SEE REDESIGNATION	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3500.00	

Full Name (Last, First, Middle Initial) <b>MR. MARTIN CANCIENNE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2016	
Mailing Address PO BOX 36 7075 HWY 1 SOUTH City State Zip Code BELLE ROSE LA 70341		<b>Transaction ID : SA11AI.18355.0</b>	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -800.00	
Name of Employer Occupation THE LIVINGSTON GROUP, LLC PARTNER		<input checked="" type="checkbox"/> Memo Item REDESIGNATION TO GENERAL	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>MR. MARTIN CANCIENNE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2016	
Mailing Address PO BOX 36 7075 HWY 1 SOUTH City State Zip Code BELLE ROSE LA 70341		<b>Transaction ID : SA11AI.18355.1</b>	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00	
Name of Employer Occupation THE LIVINGSTON GROUP, LLC PARTNER		<input checked="" type="checkbox"/> Memo Item REDESIGNATION FROM PRIMARY	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3500.00	

<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 25 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MICHAEL CANCIENNE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address 4036 BETSY LANE		<b>Transaction ID : SA11AI.18538</b>	
City HOUSTON	State TX	Amount of Each Receipt this Period _____ 1000.00	
Zip Code 77027		<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C			
Name of Employer BAKER BOTTS LP	Occupation LAWYER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. THOMAS H CANTRILL</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18752</b>	
City RICHMOND	State VA	Amount of Each Receipt this Period _____ 4.56	
Zip Code 23219-4074		<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS	
FEC ID number of contributing federal political committee. C			
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 21.48		

Full Name (Last, First, Middle Initial) <b>C. CURTIS G CARLSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18753</b>	
City RICHMOND	State VA	Amount of Each Receipt this Period _____ 4.56	
Zip Code 23219-4074		<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS	
FEC ID number of contributing federal political committee. C			
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 21.48		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1000.00
<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 26 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JEAN G CARTER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11A1.18754**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES D CASE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11A1.18755**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**JOHN C CHENAULT V**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11A1.18756**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 0.00
<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 27 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WHITTINGTON W CLEMENT**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18757**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**CASSANDRA C COLLINS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18758**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**CONSOLIDATED RESOURCE MANAGEMENT, LLC**

Mailing Address P.O. BOX 6917

City METAIRIE State LA Zip Code 70009

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : SA11AI.18665**

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

Memo Item  
 REFUNDED ON 3/22/2016

**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 28 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM COURSON**

Mailing Address 12451 HIGHLAND ROAD

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
COURSON NICKEL, LLC GOVERNMENT RELATIONS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : SA11AI.18462**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ALEXANDRA B CUNNINGHAM**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18759**

Amount of Each Receipt this Period  
4.56

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**SAMUEL A DANON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18760**

Amount of Each Receipt this Period  
4.56

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 29 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN J DELIONADO**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18761**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**STEPHEN P DEMM**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18762**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**DEE ANN DORSEY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18763**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EDWARD L DOUMA**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11Al.18764**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**MR. DAVID E DOVE**

Mailing Address **5 GLEN OAKS DRIVE**

City **HOUMA** State **LA** Zip Code **70360**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2016**

**Transaction ID : SA11Al.18439**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SEAN P DUCHARME**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11Al.18765**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**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 31 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DEIDRE G DUNCAN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18766**

Amount of Each Receipt this Period  
 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**DAVID L DUPLANTIS**

Mailing Address 192 ACADIA WOODS DR.

City THIBODAUX State LA Zip Code 70301

FEC ID number of contributing federal political committee. C

Name of Employer DUPLANTIS DESIGN GROUP Occupation OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2016

**Transaction ID : SA11AI.18399**

Amount of Each Receipt this Period  
 2700.00

Memo Item  
 SEE REATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DAVID L DUPLANTIS**

Mailing Address 192 ACADIA WOODS DR.

City THIBODAUX State LA Zip Code 70301

FEC ID number of contributing federal political committee. C

Name of Employer DUPLANTIS DESIGN GROUP Occupation OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2016

**Transaction ID : SA11AI.18399.0**

Amount of Each Receipt this Period  
 -2500.00

Memo Item  
 REATTRIBUTION TO SPOUSE

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

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

2700.00

**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 32 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MARY B DUPLANTIS**

Mailing Address 192 ACADIA WOODS DRIVE

City THIBODAUX State LA Zip Code 70301

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

Name of Employer SELF Occupation INDEPENDENT ACCOUNTING PROFESSION

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2016

**Transaction ID : SA11AI.18399.1**

Amount of Each Receipt this Period  
2500.00

Memo Item  
REATTRIBUTION FROM SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**MR. REGGIE DUPREE JR.**

Mailing Address 4127 BAYOU ESTATES DRIVE

City BOURG State LA Zip Code 70343

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

Name of Employer TERREBONNE PARISH Occupation DIRECTOR OF LEVEES

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2016

**Transaction ID : SA11AI.18369**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**FREDERICK R EAMES**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18767**

Amount of Each Receipt this Period  
4.56

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 33 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HEATHER A EASTEP**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18768**

Amount of Each Receipt this Period  
 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**W J EDWARDS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18769**

Amount of Each Receipt this Period  
 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**TARA L ELGIE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4.56

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18771**

Amount of Each Receipt this Period  
 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EDWARD W ELMORE JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18772**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.56**

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**FRANK E EMORY JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18773**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.56**

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**JUAN C ENJAMIO**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18774**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.56**

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

\_\_\_\_\_ **0.00**

\_\_\_\_\_

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PHILLIP J ESKENAZI</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18775</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.56		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.47		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. KELLY L FAGLIONI</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18776</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.56		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.47		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. SUSAN S FAILLA</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18777</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.56		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.47		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 0.00
<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 36 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ART FAVRE**

Mailing Address **PO BOX 82285**

City **BATON ROUGE** State **LA** Zip Code **70884**

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

Name of Employer **PERFORMANCE CONTRACTORS, INC.** Occupation **CONTRACTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2016**

**Transaction ID : SA11AI.18466**

Amount of Each Receipt this Period  
**2700.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ERIC H FEILER**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18778**

Amount of Each Receipt this Period  
**4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**C.** Full Name (Last, First, Middle Initial)  
**NORMAN W FICHTHORN**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18779**

Amount of Each Receipt this Period  
**4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

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

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

**2700.00**

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ANDREA B FIELD**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18780**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**KEVIN J FINTO**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18781**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**MELANIE FITZGERALD**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18782**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

\_\_\_\_\_ 0.00

\_\_\_\_\_

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL F FITZPATRICK**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.47

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11Al.18783**

Amount of Each Receipt this Period  
 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT N FLOWERS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.47

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11Al.18784**

Amount of Each Receipt this Period  
 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**AARON M FLYNN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 17.16

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11Al.18785**

Amount of Each Receipt this Period  
 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

**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 39 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM M FLYNN**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18786**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**MR. FREDERIC C FONDREN**

Mailing Address **628 WOOD ST**

City **HOUMA** State **LA** Zip Code **70360**

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

Name of Employer **FREDERIC FONDERON LAW, LLC** Occupation **PRACTITIONER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2016**

**Transaction ID : SA11AI.18516**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**RODNEY FONTAINE**

Mailing Address **9478 S FALSE RIVER DRIVE**

City **NEW ROADS** State **LA** Zip Code **70760**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18349**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **500.00**

Memo Item

**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 40 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MICHAEL FOX</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 14 / 2016	
Mailing Address P.O. BOX 487		<b>Transaction ID : SA11AI.18471</b>	
City NATCHITOCHE	State LA	Zip Code 71458	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer SELF	Occupation DENTIST		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. MR. ROY PAUL FRANCIS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address 5219 KENTON LANE		<b>Transaction ID : SA11AI.18544</b>	
City FULSHEAR	State TX	Zip Code 77441	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer GULF ISLAND FABRICATION	Occupation VP BUSINESS DEVELOPMENT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. LAUREN E FREEMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18787</b>	
City RICHMOND	State VA	Zip Code 23219-4074	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4.56	
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 21.47		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	2000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES A GALL**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.47

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18788**

Amount of Each Receipt this Period  
 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD D GARY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.47

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18789**

Amount of Each Receipt this Period  
 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**ANDREW PRICE GAY JR.**

Mailing Address 10324 POINTE COUPEE ROAD

City NEW ROADS State LA Zip Code 70760

FEC ID number of contributing federal political committee. C

Name of Employer LIVE OAK PLANTING IMC Occupation FARMER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18501**

Amount of Each Receipt this Period  
 500.00

Memo Item

**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 42 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN F GAY**

Mailing Address 57505 HYNES DRIVE

City PLAQUEMINE State LA Zip Code 70764

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18348**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MR. MIKE GEORGE**

Mailing Address 6815 NORSWORTHY ROAD

City COLLINSTON State LA Zip Code 71229

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

Name of Employer NORTHEAST LOUISIANA TELEPHONE COMP Occupation PRESIDENT & GENERAL MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18343**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**KEVIN M GEORGERIAN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.47

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18790**

Amount of Each Receipt this Period  
4.56

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 43 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN T GERHART JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18791**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**ANDREW G GEYER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18792**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**JEFFREY W GIESE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18793**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

\_\_\_\_\_ 0.00

\_\_\_\_\_

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**C C GIRAGOSIAN**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18794**

Amount of Each Receipt this Period  
**4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**MR. BRIAN J GLACKIN**

Mailing Address **4032 25TH RD N**

City **ARLINGTON** State **VA** Zip Code **22207-3904**

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

Name of Employer **SICPA** Occupation **GOV'T RELATIONS**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18398**

Amount of Each Receipt this Period  
**250.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DOUGLAS S GRANGER**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18795**

Amount of Each Receipt this Period  
**4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**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 45 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. LAURIE A GRASSO</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18796</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.56		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.47		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. CYNTHIA S GRAVES</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 01 / 2016	
Mailing Address 1933 OLD CARRIAGE LANE		<b>Transaction ID : SA11AI.18506</b>	
City BATON ROUGE State LA Zip Code 70806	Amount of Each Receipt this Period _____ 1350.00		
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Memo Item		
Name of Employer HOMEMAKER Occupation HOMEMAKER	Election Cycle-to-Date _____ 2700.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. MR. JOHN A GRAVES</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 01 / 2016	
Mailing Address 1933 OLD CARRIAGE LN		<b>Transaction ID : SA11AI.18505</b>	
City BATON ROUGE State LA Zip Code 70806	Amount of Each Receipt this Period _____ 1350.00		
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Memo Item		
Name of Employer EVANS-GRAVES ENGINEERS, INC. Occupation OWNER	Election Cycle-to-Date _____ 2700.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 2700.00
<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 46 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN A GRAVES**

Mailing Address 1933 OLD CARRIAGE LN

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
EVANS-GRAVES ENGINEERS, INC. OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2016**

**Transaction ID : SA11AI.18478**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MR. TODD B GRAVES**

Mailing Address 4273 HARVARD AVE

City State Zip Code  
BATON ROUGE LA 70808

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

Name of Employer Occupation  
RAISIN CANE'S EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**8100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 02 / 2016**

**Transaction ID : SA11AI.18666**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
SEE REATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. TODD B GRAVES**

Mailing Address 4273 HARVARD AVE

City State Zip Code  
BATON ROUGE LA 70808

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

Name of Employer Occupation  
RAISIN CANE'S EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 02 / 2016**

**Transaction ID : SA11AI.18666.0**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item  
REATTRIBUTION TO SPOUSE

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

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

**3700.00**

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. GWEN GRAVES**

Mailing Address 4273 HARVARD AVE

City State Zip Code  
BATON ROUGE LA 70808-4623

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11AI.18666.1**

Amount of Each Receipt this Period  
2700.00

Memo Item  
REATTRIBUTION FROM SPOUSE; SEE REDESIGNATION

**B.** Full Name (Last, First, Middle Initial)  
**MS. GWEN GRAVES**

Mailing Address 4273 HARVARD AVE

City State Zip Code  
BATON ROUGE LA 70808-4623

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11AI.18666.2**

Amount of Each Receipt this Period  
-2700.00

Memo Item  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MS. GWEN GRAVES**

Mailing Address 4273 HARVARD AVE

City State Zip Code  
BATON ROUGE LA 70808-4623

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11AI.18666.3**

Amount of Each Receipt this Period  
2700.00

Memo Item  
REDESIGNATION FROM PRIMARY

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

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

0.00

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GERALDINE W. GRAVOIS**

Mailing Address **17642 GREENS COURT**

City **BATON ROUGH** State **LA** Zip Code **70810**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2016**

**Transaction ID : SA11AI.18507**

Amount of Each Receipt this Period  
**2700.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**J W GRAY JR**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18797**

Amount of Each Receipt this Period  
**4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. ANN O. GREENBERG**

Mailing Address **15 SACHEM RD.**

City **GREENWICH** State **CT** Zip Code **06830**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2016**

**Transaction ID : SA11AI.18653**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

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

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

**3700.00**



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

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

FOR LINE NUMBER: PAGE 49 OF 210  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KENNETH S. GREENBERG**

Mailing Address 15 SACHEM RD.

City GREENWICH State CT Zip Code 06830

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

Name of Employer FAIR MARKET LIFE SETTLEMENT GROUP Occupation GENERAL COUNSEL

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11AI.18651**

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

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MRS. SHERRY HOPE GREENBERG-MALLIN**

Mailing Address 110 EAST 59TH STREET

City NEW YORK State NY Zip Code 10022

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11AI.18413**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS A. GREENE**

Mailing Address P.O. BOX 142

City MARINGOUIN State LA Zip Code 70757

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

Name of Employer GREENE VETERINARY CLINIC Occupation VETERINARIAN

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2016

**Transaction ID : SA11AI.18463**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

**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 50 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GRETA T GRIFFITH**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18798**

Amount of Each Receipt this Period  
**4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES L GRIZZLE**

Mailing Address **2326 CALIFORNIA ST NW**

City **WASHINGTON** State **DC** Zip Code **20008-1637**

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

Name of Employer **THE GRIZZLE COMPANY** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2016**

**Transaction ID : SA11AI.18428**

Amount of Each Receipt this Period  
**500.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MR. CHRISTOPHER A GUIDRY**

Mailing Address **PO BOX 2506**

City **RESERVE** State **LA** Zip Code **70084**

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

Name of Employer **GUIDRY ASSOCIATES LLC** Occupation **MANAGING PARTNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 09 / 2016**

**Transaction ID : SA11AI.18473**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**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 51 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**STEVEN M HAAS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.47

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18799**

Amount of Each Receipt this Period  
 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**BRIAN L HAGER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.47

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18800**

Amount of Each Receipt this Period  
 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT J HAHN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.47

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18801**

Amount of Each Receipt this Period  
 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JARRETT L HALE**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18802**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**RONALD M HANSON**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18803**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.56**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM H. HANSON**

Mailing Address **330 13TH STREET NE**

City **WASHINGTON** State **DC** Zip Code **20002**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2016**

**Transaction ID : SA11AI.18465**

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

Memo Item

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JASON W HARBOUR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.47

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18804**

Amount of Each Receipt this Period  
4.56

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**MR. JEFF HARRISON**

Mailing Address 316 PENNSYLVANIA AVE, SE  
SUITE 401

City Washington State DC Zip Code 20003

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

Name of Employer COMBEST, SELL & ASSOCIATES Occupation LAWYER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
521.99

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11AI.18512**

Amount of Each Receipt this Period  
521.99

Memo Item  
IN-KIND: CATERING SERVICES

**C.** Full Name (Last, First, Middle Initial)  
**JEFFREY L HARVEY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.47

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18805**

Amount of Each Receipt this Period  
4.56

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

521.99

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. MEREDITH L HATHORN**

Mailing Address 733 WOODVIEW CT

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
FOLEY & JUDELL, L.L.P. ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11AI.18359**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**RUDENE T HAYNES**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.47

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18806**

Amount of Each Receipt this Period  
4.56

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**MR. SAMUEL B HAYNES JR.**

Mailing Address 18142 OLD PERKINS RD E

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
BLUE BAYOU WATER PARK OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2016

**Transaction ID : SA11AI.18416**

Amount of Each Receipt this Period  
2700.00

Memo Item  
SEE REDESIGNATION

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

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

3200.00

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 55 OF 210

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. SAMUEL B HAYNES JR.**

Mailing Address 18142 OLD PERKINS RD E

City State Zip Code  
 BATON ROUGE LA 70810

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

Name of Employer Occupation  
 BLUE BAYOU WATER PARK OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2016

**Transaction ID : SA11AI.18416.0**

Amount of Each Receipt this Period  
 -1000.00

Memo Item  
 REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**MR. SAMUEL B HAYNES JR.**

Mailing Address 18142 OLD PERKINS RD E

City State Zip Code  
 BATON ROUGE LA 70810

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

Name of Employer Occupation  
 BLUE BAYOU WATER PARK OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 3700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2016

**Transaction ID : SA11AI.18416.1**

Amount of Each Receipt this Period  
 1000.00

Memo Item  
 REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**MARK S HEDBERG**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
 951 EAST BYRD ST

City State Zip Code  
 RICHMOND VA 23219-4074

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

Name of Employer Occupation  
 HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 21.47

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18807**

Amount of Each Receipt this Period  
 4.56

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

**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 56 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

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

Mailing Address 6346 32ND STREET NW

City WASHINGTON State DC Zip Code 20015-2304

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

Name of Employer ALPINE GROUP Occupation GOVERNMENT RELATIONS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4140.83**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2016**

**Transaction ID : SA11AI.18472**

Amount of Each Receipt this Period  
**2500.00**

Memo Item  
SEE REDESIGNATION

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL HENRY**

Mailing Address 6346 32ND STREET NW

City WASHINGTON State DC Zip Code 20015-2304

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

Name of Employer ALPINE GROUP Occupation GOVERNMENT RELATIONS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2016**

**Transaction ID : SA11AI.18472.0**

Amount of Each Receipt this Period  
**-1440.83**

Memo Item  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL HENRY**

Mailing Address 6346 32ND STREET NW

City WASHINGTON State DC Zip Code 20015-2304

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

Name of Employer ALPINE GROUP Occupation GOVERNMENT RELATIONS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4140.83**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2016**

**Transaction ID : SA11AI.18472.1**

Amount of Each Receipt this Period  
**1440.83**

Memo Item  
REDESIGNATION FROM PRIMARY

**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: PAGE 57 OF 210  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GREGORY G HESSE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18808**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**DAVID A HIGBEE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18809**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS Y HINER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18810**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**D B HOFFMAN**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18811**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT E HOGFOSS**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18812**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**C.** Full Name (Last, First, Middle Initial)  
**DAVID E HOLT III**

Mailing Address **3418 GEORGETOWN ST**

City **HOUSTON** State **TX** Zip Code **77005-2910**

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

Name of Employer **HBW RESOURCES** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18494**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **500.00**

Memo Item

**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 59 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GREGORY F HOLT**

Mailing Address 365 CANAL STREET  
SUITE 1410

City State Zip Code  
NEW ORLEANS LA 70130

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

Name of Employer Occupation  
DAYBROOK FISHERIES, INC. PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11A1.18411**

Amount of Each Receipt this Period  
1000.00

Memo Item  
SEE REATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GREGORY F HOLT**

Mailing Address 365 CANAL STREET  
SUITE 1410

City State Zip Code  
NEW ORLEANS LA 70130

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

Name of Employer Occupation  
DAYBROOK FISHERIES, INC. PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11A1.18411.0**

Amount of Each Receipt this Period  
-800.00

Memo Item  
REATTRIBUTION TO SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**LUCY ANN BURNETT**

Mailing Address 1000 BOURBON STREET #312

City State Zip Code  
NEW ORLEANS LA 70116

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11A1.18411.1**

Amount of Each Receipt this Period  
800.00

Memo Item  
REATTRIBUTION FROM SPOUSE

**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 60 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. JOHN R HOLZGRAEFE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18813</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.57		
FEC ID number of contributing federal political committee. C	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.48		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. GEORGE C HOWELL III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18814</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.57		
FEC ID number of contributing federal political committee. C	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.48		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. MR. STEWART B HUGHES</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address 13872 SWEETWOODS HOLLOW		<b>Transaction ID : SA11AI.18503</b>	
City ST. FRANCISVILLE State LA Zip Code 70775	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item		
Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED	Election Cycle-to-Date _____ 250.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 250.00
<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 61 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KEVIN F HULL**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18815**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**HUNTON & WILLIAMS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18554**

Amount of Each Receipt this Period  
1000.00

Memo Item  
PERMISSIBLE FUNDS: SEE MEMO ATTRIBUTIONS

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM IRONSIDE**

Mailing Address 115 NATLI DRIVE

City LA PLACE State LA Zip Code 70068-4166

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

Name of Employer RESERVE TELEPHONE COMPANY, INC Occupation PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : SA11AI.18408**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JAMIE Z ISANI**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11A1.18816**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**JUDITH H ITKIN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11A1.18817**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM A JACKSON**

Mailing Address 3717 LOCKE LANE

City HOUSTON State TX Zip Code 77027

FEC ID number of contributing federal political committee. C

Name of Employer JACKSON GILMOUR & DOBBS, PC Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11A1.18451**

Amount of Each Receipt this Period  
 2700.00

Memo Item

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

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

2700.00

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH A JAEGER JR**

Mailing Address P.O. BOX 6917

City State Zip Code  
METAIRIE LA 70009

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
CONSOLIDATED RESOURCE MANAGEMENT REAL ESTATE INVESTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18351**

Amount of Each Receipt this Period

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**LORI E JARVIS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18818**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**MATTHEW D JENKINS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18819**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 64 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. R. CHRISTIAN JOHNSEN**

Mailing Address 4636 GARFIELD ST NW

City WASHINGTON State DC Zip Code 20007-1025

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

Name of Employer JONES WALKER LLP Occupation MANAGING PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11AI.18431**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**HARRY M JOHNSON III**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18820**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**MR. BRYAN JONES**

Mailing Address 2164 HOLLYDALE AVENUE

City BATON ROUGE State LA Zip Code 70808

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

Name of Employer HNTB CORPORATION Occupation STRATEGIC PLANNING CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
437.31

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : SA11AI.18510**

Amount of Each Receipt this Period  
437.31

Memo Item  
IN-KIND: FOOD AND BEVERAGES FOR BREAKFAST EVENT

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

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

937.31



**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KEVIN W JONES**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18821**

Amount of Each Receipt this Period

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**LAURA E JONES**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18822**

Amount of Each Receipt this Period

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**DAN J JORDANGER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18823**

Amount of Each Receipt this Period

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 66 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS R JULIN**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11Al.18824**

Amount of Each Receipt this Period  
**4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**MS. MAURICE PRES KABACOFF**

Mailing Address **812 GRAVIER ST**  
**APT 200**

City **NEW ORLEANS** State **LA** Zip Code **70112-1467**

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

Name of Employer **HRI PROPERTIES** Occupation **EXEC. CHAIRMAN OF BOARD OF DIRECTO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **333.33**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 23 / 2016**

**Transaction ID : SA11Al.18368**

Amount of Each Receipt this Period  
**333.33**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MR. ALLAN KANNER**

Mailing Address **1550 DUFOSSAT ST**

City **NEW ORLEANS** State **LA** Zip Code **70115**

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

Name of Employer **KANNER & WHITLEY, LLC** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 12 / 2016**

**Transaction ID : SA11Al.18414**

Amount of Each Receipt this Period  
**500.00**

Memo Item

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

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

**833.33**

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KEVIN KELLY**

Mailing Address 40136 HIGHWAY 942

City State Zip Code  
DARROW LA 70725

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

Name of Employer Occupation  
HOUMAS HOUSE PLANTATION OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11AI.18396**

Amount of Each Receipt this Period  
1100.00

Memo Item  
IN-KIND: FACILITY RENTAL/CATERING SERVICES

**B.** Full Name (Last, First, Middle Initial)  
**DOUGLAS W KENYON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18825**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**BARRY KERN**

Mailing Address 1380 PORT OF NEW ORLEANS PLACE

City State Zip Code  
NEW ORLEANS LA 70130

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

Name of Employer Occupation  
KERN STUDIOS PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 18 / 2016

**Transaction ID : SA11AI.18515**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

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

3800.00

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL C KERRIGAN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18826**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**RYAN T KETCHUM**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18827**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**CORY H KIEF**

Mailing Address 721 ROSEDOWN DRIVE

City THIBODAUX State LA Zip Code 70301

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

Name of Employer CROSBY TUGS Occupation DIRECTOR OF BUSINESS DEVELOPMENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2016

**Transaction ID : SA11AI.18522**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

Memo Item

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

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

\_\_\_\_\_ 2700.00

\_\_\_\_\_

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. PENNY KIEF**

Mailing Address **721 ROSEDOWN DRIVE**

City **THIBODAUX** State **LA** Zip Code **70301-8044**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2016**

**Transaction ID : SA11AI.18521**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**HAL P KILSHAW**

Mailing Address **5321 CORPORATE BOULEVARD**

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

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

Name of Employer **LAMAR ADVERTISING** Occupation **VP OF GOVERNMENTAL RELATIONS**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2016**

**Transaction ID : SA11AI.18485**

Amount of Each Receipt this Period  
**500.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ALVIN KIMBLE**

Mailing Address **7266 TOM DR  
STE 200**

City **BATON ROUGE** State **LA** Zip Code **70806**

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

Name of Employer **STAR COMMUNICATIONS** Occupation **CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2016**

**Transaction ID : SA11AI.18553**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**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 70 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SCOTT H KIMPEL**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11Al.18828**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**MR. KRISTOPHER S KIRKPATRICK**

Mailing Address 4318 BROUSSARD ST

City Baton Rouge State LA Zip Code 70808

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

Name of Employer ROEDEL PARSONS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : SA11Al.18486**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**EDWARD B KOEHLER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11Al.18829**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 71 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NEDRA KOREVEC**

Mailing Address 622 STEELE BLVD.

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
CHENIER PLAIN COASTAL RESTORATION & EXECUTIVE DIRECTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : SA11AI.18488**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CHRISTOPHER G KULP**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18830**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**CHARLES W. LAMAR III**

Mailing Address P.O. BOX 66338

City State Zip Code  
BATON ROUGE LA 70896

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : SA11AI.18483**

Amount of Each Receipt this Period  
500.00

Memo Item

**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 72 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES LAPEYRE JR**

Mailing Address P.O. BOX 50699

City State Zip Code  
NEW ORLEANS LA 70150

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
LAITRAM LLC PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18415**

Amount of Each Receipt this Period

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**KURT G LARKIN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18831**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**ANDREW W LAWRENCE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18832**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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: PAGE 73 OF 210  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DANIEL M LEBEY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt 03 / 31 / 2016

Transaction ID : SA11AI.18833

Amount of Each Receipt this Period 4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**MR. GORDON S LEBLANC JR**

Mailing Address 3924 CHATFIELD AVE

City Baton Rouge State LA Zip Code 70808

FEC ID number of contributing federal political committee. C

Name of Employer STONEHENGE CAPITAL Occupation BANKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt 03 / 28 / 2016

Transaction ID : SA11AI.18363

Amount of Each Receipt this Period 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MR. STEVEN LEBLANCE**

Mailing Address 2210 CHRISTIAN STREET #9

City Baton Rouge State LA Zip Code 70808

FEC ID number of contributing federal political committee. C

Name of Employer STONEHENGE Occupation VICE PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt 03 / 31 / 2016

Transaction ID : SA11AI.18345

Amount of Each Receipt this Period 250.00

Memo Item

**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 74 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. MACKENZIE S LEDET**

Mailing Address 2181 GLENDALE AVE

City State Zip Code  
BATON ROUGE LA 70808-2839

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18387**

Amount of Each Receipt this Period

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**COREY A LEE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18834**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**BRENT A LEWIS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18835**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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: PAGE 75 OF 210  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. GARRY L LEWIS**

Mailing Address 11646 N. OAK HILLS PARKWAY

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
GARRY LEWIS PROPERTIES OWNER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
6400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11AI.18663**

Amount of Each Receipt this Period  
2700.00

Memo Item  
SEE REATTRIBUTION & REDESIGNATION

**B.** Full Name (Last, First, Middle Initial)  
**MR. GARRY L LEWIS**

Mailing Address 11646 N. OAK HILLS PARKWAY

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
GARRY LEWIS PROPERTIES OWNER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11AI.18663.0**

Amount of Each Receipt this Period  
-1000.00

Memo Item  
REATTRIBUTION TO SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**BRENDA G LEWIS**

Mailing Address 11646 N OAK HILLS PKWY

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11AI.18663.1**

Amount of Each Receipt this Period  
1000.00

Memo Item  
REATTRIBUTION FROM SPOUSE

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

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

2700.00

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. GARRY L LEWIS**

Mailing Address 11646 N. OAK HILLS PARKWAY

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
GARRY LEWIS PROPERTIES OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2016**

**Transaction ID : SA11AI.18663.2**

Amount of Each Receipt this Period  
**-1700.00**

Memo Item  
 REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**MR. GARRY L LEWIS**

Mailing Address 11646 N. OAK HILLS PARKWAY

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
GARRY LEWIS PROPERTIES OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2016**

**Transaction ID : SA11AI.18663.3**

Amount of Each Receipt this Period  
**1700.00**

Memo Item  
 REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**CATHERINE D LITTLE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18836**

Amount of Each Receipt this Period  
**4.57**

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

**0.00**

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MS. WHITNEY B LITTLE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2016	
Mailing Address 5020 E BLUEBELL DR		<b>Transaction ID : SA11AI.18649</b>	
City BATON ROUGE	State LA	Zip Code 70808	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. TIMOTHY LOHNES</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 28 / 2016	
Mailing Address 2134 WYOMING AVENUE		<b>Transaction ID : SA11AI.18526</b>	
City WASHINGTON	State DC	Zip Code 20008	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer PRICEWATERHOUSECOOPERS LLP	Occupation CPA		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) <b>C. NASH E LONG III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18837</b>	
City RICHMOND	State VA	Zip Code 23219-4074	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4.57	
Name of Employer HUNTON & WILLIAMS	Occupation ATTORNEY		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 21.48		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<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 78 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LONG LAW FIRM, LLP**

Mailing Address **ONE UNITED PLAZA**  
**4041 ESSEN LN, STE 500**

City **BATON ROUGE** State **LA** Zip Code **70809**

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2016**

**Transaction ID : SA11AI.18667**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
 PERMISSIBLE FUNDS: SEE ATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. C. KRIS KIRKPATRICK**

Mailing Address **508 E. WOODRUFF DRIVE**

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

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

Name of Employer **LONG LAW FIRM** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2016**

**Transaction ID : SA11AI.18667.0**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
 PERMISSIBLE FUNDS: LONG LAW FIRM, LLP

**C.** Full Name (Last, First, Middle Initial)  
**DAVID S LOWMAN JR**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18838**

Amount of Each Receipt this Period  
**4.57**

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 79 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN W LUSTER**

Mailing Address P.O. BOX 488

City State Zip Code  
NATCHITOCHE LA 71458-0488

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

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18496**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**TYLER MADDRY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18839**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN P MAGILL**

Mailing Address 1212 GATEWOOD DRIVE

City State Zip Code  
ALEXANDRIA VA 22307

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

Name of Employer Occupation  
THE LIVINGSTON GROUP ASSOCIATE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11AI.18498**

Amount of Each Receipt this Period  
500.00

Memo Item

**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: PAGE 80 OF 210  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MANUEL E MAISOG**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18840**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**O'NEIL P. MALBROUGH JR.**

Mailing Address 5134 HERITAGE DRIVE

City Baton Rouge State LA Zip Code 70808-4865

FEC ID number of contributing federal political committee.

Name of Employer CB&I INC. Occupation ENGINEER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18442**

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOEL MALLIN**

Mailing Address 110 EAST 59TH STREET

City New York State NY Zip Code 10022

FEC ID number of contributing federal political committee.

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18455**

Amount of Each Receipt this Period

Memo Item

**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 81 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CHRISTOPHER MANGIN JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18841**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**ALAN J MARCUIS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18842**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**FERNANDO MARGARIT**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18843**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

**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 82 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MITCHELL MARMANDE**

Mailing Address 202 CHANTILLY DRIVE

City HOUMA State LA Zip Code 70360

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

Name of Employer DELTA COAST CONSULTANTS LLC Occupation ENGINEER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2016

**Transaction ID : SA11AI.18380**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**LAURA C MARSHALL**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18844**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**MR. J ALLEN MARTIN**

Mailing Address 10095 LAWYERS RD

City VIENNA State VA Zip Code 22181

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

Name of Employer THE LIVINGSTON GROUP Occupation PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11AI.18429**

Amount of Each Receipt this Period  
500.00

Memo Item

**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 83 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JEFFREY N MARTIN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18845**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**JOHN S MARTIN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18846**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**WALFRIDO J MARTINEZ**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18847**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES D MASSIE**

Mailing Address 501 HIGH STREET

City State Zip Code  
ALEXANDRIA VA 22032

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
THE ALPINE GROUP, INC. PRINCIPAL

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18499**

Amount of Each Receipt this Period

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**LAURIE U MATHEWS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18848**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**JOHN G MAYNARD III**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18849**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 85 OF 210			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
	12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM H MCBRIDE**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11Al.18850**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

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

Mailing Address **131 UNIVERSITY HIGHLAND CT**

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

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

Name of Employer **BASCOM HUNTER** Occupation **ENGINEER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2675.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2016**

**Transaction ID : SA11Al.18444**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL C MCCANN**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11Al.18851**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**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 86 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ALEXANDER G MCGEOCH**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18852**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**JOHN C MCGRANAHAN JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18853**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**MR. RON MCMURRAY**

Mailing Address 6250 TRACI JOYCE LANE

City Alexandria State VA Zip Code 22310-2562

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

Name of Employer THE LIVINGSTON GROUP Occupation CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2016**

**Transaction ID : SA11AI.18371**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **500.00**

Memo Item

**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 87 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GUSTAVO J MEMBIELA**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18854**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**URIEL A MENDIETA**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18855**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**MARK W MENEZES**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1021.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18856**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

# 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 210			
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GARY C MESSPLAY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.48**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11Al.18857**

Amount of Each Receipt this Period  
**4.57**

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**PETER J MIGNONE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.48**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11Al.18858**

Amount of Each Receipt this Period  
**4.57**

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**JOHN MILAZZO**

Mailing Address 195 PINE CREST DRIVE

City Hammond State LA Zip Code 70401

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

Name of Employer LARD OIL COMPANY Occupation PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : SA11Al.18401**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**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 89 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PATRICK E MITCHELL</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18859</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.57		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.48		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. T J MOORE III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18860</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.57		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.48		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. THURSTON R MOORE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18861</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.57		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.48		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 0.00
<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 90 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ANN M MORTIMER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18862**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**JAY B MOWER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **17.17**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18863**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL J MUELLER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18864**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ERIC J MURDOCK**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18865**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**JOHN MURPHY**

Mailing Address **1406 CRESTWOD DRIVE**

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

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

Name of Employer **FEDERAL HILL GROUP** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 09 / 2016**

**Transaction ID : SA11AI.18492**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TED J MURPHY**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18866**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**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 92 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS P MURPHY**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18867**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**PAUL J MURRAY III**

Mailing Address PO BOX 278

City DESTREHAN State LA Zip Code 70047

FEC ID number of contributing federal political committee. C

Name of Employer MURRAY ARCHITECTS Occupation EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11AI.18508**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DAVID MUSTONE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18868**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 93 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES P NAUGHTON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18869**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**ERIC J NEDELL**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18870**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL NEDZBALA**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18871**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 94 OF 210  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NEELY S NEWCHURCH**

Mailing Address 101 PLATER COURT

City State Zip Code  
THIBODAUX LA 70301

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2016

**Transaction ID : SA11AI.18469**

Amount of Each Receipt this Period  
 2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JIM NICKEL**

Mailing Address 308 CORNELL AVENUE

City State Zip Code  
BATON ROUGE LA 70808

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

Name of Employer Occupation  
COURSON NICKEL, LLC GOVERNMENT RELATIONS

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : SA11AI.18406**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**LONNIE D NUNLEY III**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18872**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

3700.00

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PETER K O'BRIEN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18874**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**JOHN T O'CONNOR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18875**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**JOHN D O'NEILL JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18876**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

**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 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

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

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11Al.18873**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**MR. ERIC K OBERLANDER**

Mailing Address 1322 LEE DRIVE

City Baton Rouge State LA Zip Code 70808-8717

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

Name of Employer THE NEUROMEDICAL CENTER CLINIC Occupation NEUROSURGEON

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2016

**Transaction ID : SA11Al.18518**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DAVID M OLIVER JR**

Mailing Address 4606 W ALABAMA ST

City Houston State TX Zip Code 77027

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

Name of Employer ALLEN BOONE HUMPHRIES ROBINSON Occupation PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11Al.18545**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

2000.00



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

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

FOR LINE NUMBER: PAGE 97 OF 210  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. J. WILLIAM OSWALD**

Mailing Address 8201 SCENIC RIDGE CV

City State Zip Code  
AUSTIN TX 78735

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

Name of Employer Occupation  
KOCH REGIONAL MANAGER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18540**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BRIAN V OTERO**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18877**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**RANDALL S PARKS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
21.48

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18878**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 98 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PETER S PARTEE SR**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18879**

Amount of Each Receipt this Period  
**4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**DEEPESH PATEL**

Mailing Address **15550 HIGHLAND ROAD**

City **BATON ROUGE** State **LA** Zip Code **70810**

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

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2016**

**Transaction ID : SA11AI.18390**

Amount of Each Receipt this Period  
**500.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**J S PATTERSON**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18880**

Amount of Each Receipt this Period  
**4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**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 99 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DJORDJE PETKOSKI**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11Al.18881**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**BRUCE W PETRY**

Mailing Address **1332 LAWTON DRIVE**

City **SULPHUR** State **LA** Zip Code **70665**

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

Name of Employer **CAMERON COMMUNICATIONS, LLC** Occupation **PRESIDENT/GENERAL MANAGER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2016**

**Transaction ID : SA11Al.18477**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **500.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JAMES M PINNA**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **17.18**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11Al.18882**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**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 100 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM T. POE**

Mailing Address 36332 TOULOUSE ST

City State Zip Code  
PRAIRIEVILLE LA 70769

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

Name of Employer Occupation  
WILLIAM T. POE & ASSOCIATES, INC. EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11AI.18448**

Amount of Each Receipt this Period  
2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ERIC R POGUE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.49

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18883**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**LAURENCE H POSORSKE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.49

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18884**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

2700.00

**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 101 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KURTIS A POWELL**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18885**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**LEWIS F POWELL III**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18886**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT T QUACKENBOSS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18887**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

**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 102 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HUGH RAETZSCH**

Mailing Address 2832 VALCOUR AIME

City State Zip Code  
BATON ROUGE LA 70820

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

Name of Employer Occupation  
LYONS SPECIALTY COMPANY, LLC PRESIDENT / CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : SA11AI.18487**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JOHN J RANGE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City State Zip Code  
RICHMOND VA 23219-4074

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

Name of Employer Occupation  
HUNTON & WILLIAMS ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18888**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**NEIL RECORD**

Mailing Address PO BOX 8018

City State Zip Code  
CLINTON LA 70722

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

Name of Employer Occupation  
RECORD AGENCY, INC. INSURANCE AGENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2016

**Transaction ID : SA11AI.18354**

Amount of Each Receipt this Period  
1000.00

Memo Item

**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 103 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BAKER R RECTOR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18889**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**SHAWN P REGAN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18890**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**SONA REWARI**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18891**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 104 OF 210  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS A RICE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18892**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**JENNINGS G RITTER II**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18893**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**KATHY ROBB**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18894**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00



**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 105 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DARYL B ROBERTSON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18895**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**GREGORY B ROBERTSON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18896**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**MR. BERNIE ROBINSON**

Mailing Address 408 A ST SE

City WASHINGTON State DC Zip Code 20003

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

Name of Employer LIVINGSTON GROUP Occupation CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11AI.18377**

Amount of Each Receipt this Period  
1000.00

Memo Item

**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 106 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT M ROLFE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18897**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**BRENT A ROSSER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18898**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM L ROWE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18899**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

**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 107 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MARGUERITE R RUBY**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18900**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**MARY NASH K RUSHER**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18901**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**C.** Full Name (Last, First, Middle Initial)  
**D. K SAMPSON**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **17.18**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18902**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

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

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

\_\_\_\_\_ **0.00**

\_\_\_\_\_

**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 108 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ALAN JOSEPH SAVOIE**

Mailing Address P.O. BOX 90

City State Zip Code  
HAHNVILLE LA 70057

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
COOPER CONSOLIDATED ASSISTANT MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18379**

Amount of Each Receipt this Period

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MR. ARTHUR G SCANLAN II**

Mailing Address 913 S BURNSIDE AVE

City State Zip Code  
GONZALES LA 70737

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
MANAGER MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18405**

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN D SCANLAN**

Mailing Address 10440 SHADOW LAKE DR

City State Zip Code  
GEISMAR LA 70734

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
EATEL PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18404**

Amount of Each Receipt this Period

Memo Item  
SEE REDESIGNATION

**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 109 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>MR. JOHN D SCANLAN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 14 / 2016	
Mailing Address 10440 SHADOW LAKE DR		<b>Transaction ID : SA11AI.18404.0</b>	
City State Zip Code GEISMAR LA 70734	Amount of Each Receipt this Period _____ -2000.00		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item REDESIGNATION TO GENERAL		
Name of Employer Occupation EATEL PRESIDENT	Election Cycle-to-Date _____ 2700.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>MR. JOHN D SCANLAN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 14 / 2016	
Mailing Address 10440 SHADOW LAKE DR		<b>Transaction ID : SA11AI.18404.1</b>	
City State Zip Code GEISMAR LA 70734	Amount of Each Receipt this Period _____ 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item REDESIGNATION FROM PRIMARY		
Name of Employer Occupation EATEL PRESIDENT	Election Cycle-to-Date _____ 4700.00		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>GREGORY J SCHMITT</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18903</b>	
City State Zip Code RICHMOND VA 23219-4074	Amount of Each Receipt this Period _____ 4.57		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer Occupation HUNTON & WILLIAMS ATTORNEY	Election Cycle-to-Date _____ 21.49		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 0.00
<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 110 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN R SCHNEIDER**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18904**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**JEFFREY P SCHROEDER**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18905**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**C.** Full Name (Last, First, Middle Initial)  
**PETER J SCLAFANI**

Mailing Address **37395 PROVENCE POINTE AVENUE**

City **PRAIRIEVILLE** State **LA** Zip Code **70769**

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

Name of Employer **RUFFINO'S RESTAURANT** Occupation **CHEF**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2016**

**Transaction ID : SA11AI.18482**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **500.00**

Memo Item

**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 111 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MATTHEW A SCOVILLE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18906</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.57		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 17.18		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. JAMES S SEEVERS JR</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18907</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.57		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.49		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. DOUGLASS P SELBY</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18908</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.57		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.49		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 0.00
<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 112 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOEL R SHARP**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18909**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL R SHEBELSKIE**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18910**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**C.** Full Name (Last, First, Middle Initial)  
**SCOTT SHIELDS**

Mailing Address **5 RIDGEDALE AVE**

City **SUMMIT** State **NJ** Zip Code **07901**

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

Name of Employer **SELF EMPLOYED** Occupation **DESIGNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 15 / 2016**

**Transaction ID : SA11AI.18658**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **500.00**

Memo Item

**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 113 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RYAN A SHORES**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18911**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**GEORGE P SIBLEY III**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee.

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18912**

Amount of Each Receipt this Period

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL J. SIEGEL**

Mailing Address 201 ST. CHARLES AVE  
SUITE 4411

City New Orleans State LA Zip Code 70170

FEC ID number of contributing federal political committee.

Name of Employer CORPORATE REALTY Occupation REAL ESTATE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.18352**

Amount of Each Receipt this Period

Memo Item

**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 114 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DONALD F SIMONE**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18913**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**AARON P SIMPSON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18914**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**JO ANNE E SIRGADO**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18915**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

\_\_\_\_\_ 0.00

\_\_\_\_\_

**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 115 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LAURENCE E SKINNER**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **17.18**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18916**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**SCOTT A SMALL**

Mailing Address **44242 GOLD PLACE ROAD**

City **SAINT AMANT** State **LA** Zip Code **70774**

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

Name of Employer **RESERVE TELEPHONE COMPANY INC.** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2016**

**Transaction ID : SA11AI.18479**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CARYL G SMITH**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18917**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**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 116 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN R SMITH**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18918**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**KENNETH WM. SMITH**

Mailing Address **7947 PARK AVENUE**

City **HOUMA** State **LA** Zip Code **70364**

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

Name of Employer **T. BAKER SMITH CIVIL ENGINEERING** Occupation **PRESIDENT/CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2016**

**Transaction ID : SA11AI.18417**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **2700.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**LISA J SOTTO**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18919**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

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

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

\_\_\_\_\_ **2700.00**

\_\_\_\_\_

**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 117 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOSEPH C STANKO JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18920**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**TODD M STENERSON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18921**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**JOHN J STENGER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18922**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

**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 118 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GREG N STILLMAN**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18923**

Amount of Each Receipt this Period  
**4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**B.** Full Name (Last, First, Middle Initial)  
**FRANK M STUART SR.**

Mailing Address **12 AZALEA CT.**

City **METAIRIE** State **LA** Zip Code **70005**

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

Name of Employer **STUART CONSULTING GROUP** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2016**

**Transaction ID : SA11AI.18504**

Amount of Each Receipt this Period  
**2700.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MR. RAYMOND C SULLIVAN**

Mailing Address **4029 TEXAS WILDLIFE TRAIL**

City **AUSTIN** State **TX** Zip Code **78735-1738**

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

Name of Employer **SULLIVAN PUBLIC AFFAIRS, INC.** Occupation **GOVERNMENT AND PUBLIC RELATIONS CC**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18542**

Amount of Each Receipt this Period  
**250.00**

Memo Item

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

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

**2950.00**

**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 119 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BRIAN J TANENBAUM**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18924**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**ANDREW J TAPSCOTT**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18925**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT M TATA**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18926**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

0.00

**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 120 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WENDELL L TAYLOR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.49

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18927**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM L TAYLOR JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.49

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11AI.18928**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**TIMOTHY JASON TEMPLE**

Mailing Address 13755 CLARENDON DRIVE

City BATON ROUGE State LA Zip Code 70810-3584

FEC ID number of contributing federal political committee. C

Name of Employer WORLEY COMPANIES Occupation EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

**Transaction ID : SA11AI.18468**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

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

2700.00



**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 121 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WILL TERRILL**

Mailing Address 1327 CORTLANDT STREET

City HOUSTON State TX Zip Code 77008

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

Name of Employer INTERMARINE, L.L.C. Occupation VICE-PRESIDENT, US FLAG SERVICE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18450**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GARY E THOMPSON**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18929**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**B C TOLLEY III**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18930**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 122 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL D TURGEON**

Mailing Address 147 UPPER MOUNTAIN AVE

City MONTCLAIR State NJ Zip Code 07042

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

Name of Employer PRICEWATERHOUSECOOPERS Occupation PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 25 / 2016

**Transaction ID : SA11AI.18656**

Amount of Each Receipt this Period  
 1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ANDREW J TURNER**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City RICHMOND State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 21.49

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18931**

Amount of Each Receipt this Period  
 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS TURNER**

Mailing Address 2250 KLEINERT AVE

City BATON ROUGE State LA Zip Code 70806

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

Name of Employer TURNER INDUSTRIES Occupation PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 8100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : SA11AI.18434**

Amount of Each Receipt this Period  
 5400.00

Memo Item  
 SEE REATTRIBUTION & REDESIGNATION

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

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

6900.00

**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 123 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS TURNER**

Mailing Address 2250 KLEINERT AVE

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
TURNER INDUSTRIES PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : SA11AI.18434.0**

Amount of Each Receipt this Period  
-2700.00

Memo Item  
REATTRIBUTION TO SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**SARI TURNER**

Mailing Address 2250 KLEINERT AVE

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
ENTREPRENEUR ENTREPRENEUR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : SA11AI.18434.1**

Amount of Each Receipt this Period  
2700.00

Memo Item  
REATTRIBUTION FROM SPOUSE; SEE REDESIGNATION

**C.** Full Name (Last, First, Middle Initial)  
**SARI TURNER**

Mailing Address 2250 KLEINERT AVE

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
ENTREPRENEUR ENTREPRENEUR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : SA11AI.18434.2**

Amount of Each Receipt this Period  
-2700.00

Memo Item  
REDESIGNATION TO GENERAL

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

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

0.00

**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 124 OF 210
	<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	

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)  
**SARI TURNER**

Mailing Address 2250 KLEINERT AVE

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
ENTREPRENEUR ENTREPRENEUR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11AI.18434.3**

Amount of Each Receipt this Period  
2700.00

Memo Item  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS TURNER**

Mailing Address 2250 KLEINERT AVE

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
TURNER INDUSTRIES PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11AI.18434.4**

Amount of Each Receipt this Period  
-2700.00

Memo Item  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS TURNER**

Mailing Address 2250 KLEINERT AVE

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
TURNER INDUSTRIES PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : SA11AI.18434.5**

Amount of Each Receipt this Period  
2700.00

Memo Item  
REDESIGNATION FROM PRIMARY

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

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

0.00

**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 125 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JULIE I UNGERMAN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18932**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**MR. BENJAMIN TROY VALLE**

Mailing Address 13208 QUAIL RIDGE AVE

City Baton Rouge State LA Zip Code 70810

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11AI.18361**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MARK C VAN DEUSEN**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18933**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**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 126 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DANIEL G VIVARELLI JR**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18934**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**MARK R VOWELL**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18935**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**AMANDA L WAIT**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **21.49**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18936**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4.57

Memo Item  
 HUNTON & WILLIAMS: PERMISSIBLE FUNDS

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

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

\_\_\_\_\_ 0.00

\_\_\_\_\_

**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 127 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SARA W WALLACE**

Mailing Address 86 HARBOUR TOWN COURT

City State Zip Code  
NEW ORLEANS LA 70131

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11A1.18410**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM WALLACE**

Mailing Address 86 HARBOUR TOWN COURT

City State Zip Code  
NEW ORLEANS LA 70131

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

Name of Employer Occupation  
DAYBROOK FISHERIES, INC. COO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11A1.18409**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AUGUST WEBBER**

Mailing Address 1712 GRASS CT.

City State Zip Code  
SOUTHLAKE TX 76092

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

Name of Employer Occupation  
PEPSICO FINANCE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 08 / 2016

**Transaction ID : SA11A1.18403**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM L WEHRUM**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18937**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**MALCOLM C WEISS**

Mailing Address RIVERFRONT PLAZA, EAST TOWER  
951 EAST BYRD ST

City Richmond State VA Zip Code 23219-4074

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

Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11AI.18938**

Amount of Each Receipt this Period  
4.57

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**MR. RANDALL R. WHITE**

Mailing Address 201 ST CHARLES AVE  
STE. 4411

City New Orleans State LA Zip Code 70170

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

Name of Employer CORPORATE REALTY Occupation SALES & MARKETING

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2016

**Transaction ID : SA11AI.18519**

Amount of Each Receipt this Period  
1500.00

Memo Item

**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 129 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. JEFFREY WIENER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 22 / 2016	
Mailing Address 601 PENNSYLVANIA AVE NW SUITE 210, SOUTH BUILDING		<b>Transaction ID : SA11AI.18425</b>	
City WASHINGTON State DC Zip Code 20004	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Memo Item		
Name of Employer THE INGRAM GROUP Occupation GOVERNMENT RELATIONS EXECUTIVE	Election Cycle-to-Date _____ 500.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. AMY M WILLIAMS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18939</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.57		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.50		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. HOLLY H WILLIAMSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18940</b>	
City RICHMOND State VA Zip Code 23219-4074	Amount of Each Receipt this Period _____ 4.57		
FEC ID number of contributing federal political committee. <b>C</b>	<input checked="" type="checkbox"/> Memo Item HUNTON & WILLIAMS: PERMISSIBLE FUNDS		
Name of Employer HUNTON & WILLIAMS Occupation ATTORNEY	Election Cycle-to-Date _____ 21.50		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 500.00
<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 130 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MS. KAREN WILLIAMS SANTA</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address 77 WALLACE MANOR ROAD		<b>Transaction ID : SA11AI.18457</b>	
City EDGEWATER	State MD	Zip Code 21037	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period _____ 1500.00	
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 1500.00	

Full Name (Last, First, Middle Initial) <b>B. SUSAN F WILTSIE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18941</b>	
City RICHMOND	State VA	Zip Code 23219-4074	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period _____ 4.57	
Name of Employer HUNTON & WILLIAMS		Occupation ATTORNEY	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 21.50	

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial) <b>C. ALLISON D WOOD</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD ST		<b>Transaction ID : SA11AI.18942</b>	
City RICHMOND	State VA	Zip Code 23219-4074	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period _____ 4.57	
Name of Employer HUNTON & WILLIAMS		Occupation ATTORNEY	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 21.50	

Memo Item  
HUNTON & WILLIAMS: PERMISSIBLE FUNDS

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1500.00
<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 131 OF 210
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD L WYATT JR**

Mailing Address **RIVERFRONT PLAZA, EAST TOWER**  
**951 EAST BYRD ST**

City **RICHMOND** State **VA** Zip Code **23219-4074**

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

Name of Employer **HUNTON & WILLIAMS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**21.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11AI.18943**

Amount of Each Receipt this Period  
**4.57**

Memo Item  
**HUNTON & WILLIAMS: PERMISSIBLE FUNDS**

**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

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 M / D 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).....

**0.00**

**154242.63**

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

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

FOR LINE NUMBER: PAGE 132 OF 210  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
ACTION COMMITTEE FOR RURAL ELECTRIFICATION/MISSOURI COOPERATIVES (FKA MISSOURI ACRE)

Mailing Address PO BOX 1645

City State Zip Code  
JEFFERSON CITY MO 65102

FEC ID number of contributing federal political committee. **C** C00008169

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 23 / 2016

**Transaction ID : SA11C.18566**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
ACTION COMMITTEE FOR RURAL ELECTRIFICATION/MISSOURI COOPERATIVES (FKA MISSOURI ACRE)

Mailing Address PO BOX 1645

City State Zip Code  
JEFFERSON CITY MO 65102

FEC ID number of contributing federal political committee. **C** C00008169

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11C.18585**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 2450 CRYSTAL DRIVE  
SUITE 500

City State Zip Code  
ARLINGTON VA 22202

FEC ID number of contributing federal political committee. **C** C00374447

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : SA11C.18613**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 210
	<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)  
**AIR LINE PILOTS ASSOCIATION PAC**

Mailing Address 1625 MASSACHUSETTS AVE. NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 8000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11C.18547**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

Mailing Address 1015 15TH STREET NW SUITE 802

City WASHINGTON State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2016

**Transaction ID : SA11C.18570**

Amount of Each Receipt this Period  
 3000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 101 NORTH 3RD STREET

City MOORHEAD State MN Zip Code 56560

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2016

**Transaction ID : SA11C.18562**

Amount of Each Receipt this Period  
 5000.00

Memo Item

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

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

9000.00

**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 134 OF 210
	<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)  
**AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE**

Mailing Address 1061 AMERICAN LANE

City State Zip Code  
SCHAUMBURG IL 60173

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 01 / 2016

**Transaction ID : SA11C.18596**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BOOTS POLITICAL ACTION COMMITTEE**

Mailing Address 332 W LEE HWY #303

City State Zip Code  
WARRENTON VA 20186

FEC ID number of contributing federal political committee. **C C00567545**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11C.18576**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BUTLER SNOW POLITICAL ACTION COMMITTEE**

Mailing Address P. O. BOX 22567  
17TH FLOOR REGIONS PLAZA

City State Zip Code  
JACKSON MS 39225

FEC ID number of contributing federal political committee. **C C00382275**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.18619**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 210
	<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)  
**CARGILL, INCORPORATED POLITICAL ACTION COMMITTEE**

Mailing Address P.O. BOX 9300

City State Zip Code  
MINNEAPOLIS MN 55440

FEC ID number of contributing federal political committee. **C C00067884**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 03 / 2016

**Transaction ID : SA11C.18601**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CHARTER COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE**

Mailing Address 400 ATLANTIC STREET  
10TH FLOOR

City State Zip Code  
STAMFORD CT 06901

FEC ID number of contributing federal political committee. **C C00426775**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11C.18671**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CHICAGO BRIDGE & IRON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1050 K STREET, NW  
SUITE 620

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00104885**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.18615**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 210
	<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**

Full Name (Last, First, Middle Initial)  
**COALPAC, A POLITICAL ACTION COMMITTEE OF THE NATIONAL MINING ASSOCIATION**

Mailing Address **101 CONSTITUTION AVENUE, NW  
SUITE 500 EAST**

City State Zip Code  
**WASHINGTON DC 20001**

FEC ID number of contributing federal political committee. **C C00109819**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 31 2016**

**Transaction ID : SA11C.18599**

Amount of Each Receipt this Period  
**500.00**  
 Memo Item

Full Name (Last, First, Middle Initial)  
**COLUMBIA PIPELINE GROUP, INC. PAC**

Mailing Address **10 G STREET NE  
SUITE 400**

City State Zip Code  
**WASHINGTON DC 20002**

FEC ID number of contributing federal political committee. **C C00575340**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 23 2016**

**Transaction ID : SA11C.18564**

Amount of Each Receipt this Period  
**1000.00**  
 Memo Item

Full Name (Last, First, Middle Initial)  
**COLUMBIA PIPELINE GROUP, INC. PAC**

Mailing Address **10 G STREET NE  
SUITE 400**

City State Zip Code  
**WASHINGTON DC 20002**

FEC ID number of contributing federal political committee. **C C00575340**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 31 2016**

**Transaction ID : SA11C.18625**

Amount of Each Receipt this Period  
**1000.00**  
 Memo Item

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

**2500.00**

**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 137 OF 210
	<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)  
CRESCENT RIVER PORT PILOTS ASSOCIATION FEDERAL POLITICAL ACTION COMMITTEE/CRPPA FED PAC

Mailing Address 8712 HWY 23

City State Zip Code  
BELLE CHASSE LA 70037

FEC ID number of contributing federal political committee. **C** C00221077

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11C.18638**

Amount of Each Receipt this Period  
1300.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
CRESCENT RIVER PORT PILOTS ASSOCIATION FEDERAL POLITICAL ACTION COMMITTEE/CRPPA FED PAC

Mailing Address 8712 HWY 23

City State Zip Code  
BELLE CHASSE LA 70037

FEC ID number of contributing federal political committee. **C** C00221077

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2016

**Transaction ID : SA11C.19212**

Amount of Each Receipt this Period  
1400.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

Mailing Address 316 PENNSYLVANIA AVE SE  
SUITE 401

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00503680

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11C.18581**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

3700.00

**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 138 OF 210
	<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)  
ENERGY TRANSFER EMPLOYEE MANAGEMENT COMPANY PAC (ENERGY TRANSFER PAC)

Mailing Address 400 W. 15TH ST.  
SUITE 720

City State Zip Code  
AUSTIN TX 78701

FEC ID number of contributing federal political committee. **C** C00438754

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11C.18574**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
ENERGY CORPORATION POLITICAL ACTION COMMITTEE (ENPAC)

Mailing Address 425 WEST CAPITOL AVENUE, STE24B

City State Zip Code  
LITTLE ROCK AR 72201

FEC ID number of contributing federal political committee. **C** C00363879

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.18592**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC)

Mailing Address PO BOX 20503

City State Zip Code  
INDIANAPOLIS IN 46220

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : SA11C.18608**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

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

6000.00

**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 139 OF 210
	<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**

Full Name (Last, First, Middle Initial) <b>GARVERPAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016
Mailing Address PO BOX 1084		<b>Transaction ID : SA11C.18646</b>
City NORTH LITTLE ROCK	State AR	Zip Code 72115
FEC ID number of contributing federal political committee. C C00559609	Amount of Each Receipt this Period 250.00	
Name of Employer	Occupation	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) GRAND TRUNK WESTERN RAILROAD CO. - ILLINOIS CENTRAL RAILROAD CO. PAC (GTW-IC PAC)		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 23 / 2016
Mailing Address 601 PENNSYLVANIA AVENUE NW SUITE 500, NORTH BUILDING		<b>Transaction ID : SA11C.18568</b>
City WASHINGTON	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C C00095117	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>GULF COAST BANK &amp; TRUST WAVE PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2016
Mailing Address 201 N CARROLLTON AVE		<b>Transaction ID : SA11C.18572</b>
City NEW ORLEANS	State LA	Zip Code 70119
FEC ID number of contributing federal political committee. C C00496588	Amount of Each Receipt this Period 2700.00	
Name of Employer	Occupation	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3950.00
<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 140 OF 210
	<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)  
**HDR, INC. PAC**

Mailing Address 8404 INDIAN HILLS DRIVE

City OMAHA State NE Zip Code 68114

FEC ID number of contributing federal political committee. **C** C00103903

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : SA11C.18606**

Amount of Each Receipt this Period  
 750.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**HNTB HOLDINGS LTD. PAC**

Mailing Address 715 KIRK DRIVE

City KANSAS CITY State MO Zip Code 64105

FEC ID number of contributing federal political committee. **C** C00386029

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.18644**

Amount of Each Receipt this Period  
 3000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**IBERIABANK CORPORATION FED PAC**

Mailing Address 200 WEST CONGRESS STREET

City LAFAYETTE State LA Zip Code 70501

FEC ID number of contributing federal political committee. **C** C00406066

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.18558**

Amount of Each Receipt this Period  
 500.00

Memo Item

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

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

4250.00

**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 141 OF 210
	<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)  
**IHEARTMEDIA, INC. - CLEAR CHANNEL OUTDOOR PAC**

Mailing Address 200 E. BASSE ROAD

City SAN ANTONIO State TX Zip Code 78209

FEC ID number of contributing federal political committee. **C C00279216**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11C.18589**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP**

Mailing Address 20 F STREET, NW SUITE 610

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00022343**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2016

**Transaction ID : SA11C.18560**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**INGRAM BARGE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address ONE BELLE MEADE PL 4400 HARDING RD

City NASHVILLE State TN Zip Code 37205

FEC ID number of contributing federal political committee. **C C00364471**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 03 / 2016

**Transaction ID : SA11C.18603**

Amount of Each Receipt this Period  
1000.00

Memo Item

**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 142 OF 210
	<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. LAMAR CORPORATION POLITICAL ACTION COMMITTEE (LAMARPAC)**

Full Name (Last, First, Middle Initial)  
LAMAR CORPORATION POLITICAL ACTION COMMITTEE (LAMARPAC)

Mailing Address PO BOX 66338

City: BATON ROUGE    State: LA    Zip Code: 70896

FEC ID number of contributing federal political committee: **C** C00174599

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

Receipt For: 2016  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_ 5500.00

Date of Receipt: 03 / 14 / 2016

**Transaction ID : SA11C.18604**

Amount of Each Receipt this Period: \_\_\_\_\_ 500.00

Memo Item

**B. MALLINCKRODT LLC POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
MALLINCKRODT LLC POLITICAL ACTION COMMITTEE

Mailing Address 601 PENNSYLVANIA AVE. NW  
NORTH BUILDING, STE 650

City: WASHINGTON    State: DC    Zip Code: 20004

FEC ID number of contributing federal political committee: **C** C00569152

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

Receipt For: 2016  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_ 1500.00

Date of Receipt: 03 / 31 / 2016

**Transaction ID : SA11C.18621**

Amount of Each Receipt this Period: \_\_\_\_\_ 1500.00

Memo Item

**C. MCDONALDS CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
MCDONALDS CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 2111 MCDONALDS DR  
DEPT 213

City: OAK BROOK    State: IL    Zip Code: 60523

FEC ID number of contributing federal political committee: **C** C00063164

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

Receipt For: 2016  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_ 1000.00

Date of Receipt: 03 / 31 / 2016

**Transaction ID : SA11C.18623**

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

Memo Item

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

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

\_\_\_\_\_ 3000.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 210
	<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)  
**MICHIGAN SUGAR COMPANY GROWERS POLITICAL ACTION COMMITTEE**

Mailing Address **2600 SOUTH EUCLID AVENUE**

City **BAY CITY** State **MI** Zip Code **48707**

FEC ID number of contributing federal political committee. **C C00384354**

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

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2016**

**Transaction ID : SA11C.18577**

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

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MINEPAC, A POLITICAL ACTION COMMITTEE OF THE NATIONAL MINING ASSOCIATION**

Mailing Address **101 CONSTITUTION AVE, NW, STE 500E**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00304634**

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

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : SA11C.18597**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **500.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC**

Mailing Address **7525 RED RIVER ROAD**

City **WAHPETON** State **ND** Zip Code **58075**

FEC ID number of contributing federal political committee. **C C00164939**

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

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2016**

**Transaction ID : SA11C.18582**

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

Memo Item

**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 144 OF 210
	<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 ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)**

Mailing Address 1212 NEW YORK AVE NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00283135**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : SA11C.18635**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1101 KING STREET  
SUITE 600

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00144766**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11C.18546**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL COTTON COUNCIL COMMITTEE FOR THE ADVANCEMENT OF COTTON**

Mailing Address P.O. BOX 2995

City CORDOVA State TN Zip Code 38088

FEC ID number of contributing federal political committee. **C C00023028**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : SA11C.18629**

Amount of Each Receipt this Period  
2000.00

Memo Item

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

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

6500.00



**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 145 OF 210
	<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 MULTIFAMILY HOUSING COUNCIL POLITICAL ACTION COMMITTEE**

Mailing Address 1850 M STREET, NW  
SUITE 540

City WASHINGTON State DC Zip Code 20036-5816

FEC ID number of contributing federal political committee. **C C00130773**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.18616**

Amount of Each Receipt this Period  
3000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL PROPANE GAS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1899 L STREET, NW  
SUITE 350

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00079681**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2016

**Transaction ID : SA11C.18563**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX State VA Zip Code 22030

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.18624**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 210
	<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 TELECOMMUNICATIONS COOPERATIVE ASSOCIATION RURAL BROADBAND PAC

Mailing Address 4121 WILSON BLVD.  
10TH FLOOR

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00004473

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2016

**Transaction ID : SA11C.18640**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
NRG ENERGY INC POLITICAL ACTION COMMITTEE (NRG PAC)

Mailing Address 211 CARNEGIE CENTER

City PRINCETON State NJ Zip Code 08540

FEC ID number of contributing federal political committee. **C** C00366559

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : SA11C.18633**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
NRG ENERGY INC POLITICAL ACTION COMMITTEE (NRG PAC)

Mailing Address 211 CARNEGIE CENTER

City PRINCETON State NJ Zip Code 08540

FEC ID number of contributing federal political committee. **C** C00366559

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.18647**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 210
	<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)  
**OLSON FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 16381

City State Zip Code  
SUGAR LAND TX 77496

FEC ID number of contributing federal political committee. **C** C00437913

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1134.25

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2016

**Transaction ID : SA11C.18341**

Amount of Each Receipt this Period  
1134.25

Memo Item  
IN-KIND: FACILITY RENTAL/CATERING SERVICES/PARKING

**B.** Full Name (Last, First, Middle Initial)  
**OUTDOOR ADVERTISING ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE**

Mailing Address 1850 M STREET, N.W.  
SUITE 1040

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00045781

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : SA11C.18631**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PANHANDLE PEANUT GROWERS PAC**

Mailing Address PO BOX 361

City State Zip Code  
WELLINGTON TX 79095

FEC ID number of contributing federal political committee. **C** C00382507

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11C.18579**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

2134.25

**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 148 OF 210
	<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)  
**PLAINS COTTON GROWERS INC PAC**

Mailing Address 4517 W LOOP 289

City LUBBOCK State TX Zip Code 79414

FEC ID number of contributing federal political committee. **C** C00599084

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11C.18669**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE (REALPAC)**

Mailing Address 801 PENNSYLVANIA AVENUE SUITE 720

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00033779

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2016

**Transaction ID : SA11C.18642**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SHELL OIL COMPANY EMPLOYEES' POLITICAL AWARENESS COMMITTEE**

Mailing Address 1050 K STREET NW, SUITE 700

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00039503

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.18618**

Amount of Each Receipt this Period  
 2000.00

Memo Item

**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 149 OF 210
	<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)  
**SNAKE RIVER SUGAR COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1951 SOUTH SATURN WAY  
SUITE 100

City BOISE State ID Zip Code 83709

FEC ID number of contributing federal political committee. **C C00326389**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 02 / 2016

**Transaction ID : SA11C.18637**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 500  
83550 COUNTY RD 21

City RENVILLE State MN Zip Code 56284

FEC ID number of contributing federal political committee. **C C00166348**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11C.18590**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SPECTRA ENERGY CORP POLITICAL ACTION COMMITTEE (SPECTRA-DCP PAC)**

Mailing Address 5400 WESTHEIMER COURT

City HOUSTON State TX Zip Code 77056

FEC ID number of contributing federal political committee. **C C00429662**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : SA11C.18549**

Amount of Each Receipt this Period  
2000.00

Memo Item

**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 150 OF 210
<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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11C.18587**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 929 LONG BRIDGE DRIVE

City ARLINGTON State VA Zip Code 22202

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.18559**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
THE NEW REPUBLICAN MAJORITY FUND

Mailing Address P.O. BOX 53176

City WASHINGTON State DC Zip Code 20009

FEC ID number of contributing federal political committee. **C** C00219220

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

**Transaction ID : SA11C.18584**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

7000.00

**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 151 OF 210
	<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)  
**THE WILLIAMS COMPANIES, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1627 I STREET NW  
STE 900

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.18550**

Amount of Each Receipt this Period  
3000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**THE WILLIAMS COMPANIES, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1627 I STREET NW  
STE 900

City WASHINGTON State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.18551**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**U.S. TRAVEL ASSOCIATION PAC**

Mailing Address 1100 NEW YORK AVENUE  
SUITE 450W

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00457754**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2016

**Transaction ID : SA11C.18673**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

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

6500.00

**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 152 OF 210
	<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)  
**UNITED PARCEL SERVICE INC. PAC**

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2016

**Transaction ID : SA11C.18610**

Amount of Each Receipt this Period  
 500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**UNITED PARCEL SERVICE INC. PAC**

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 8000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11C.18556**

Amount of Each Receipt this Period  
 2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**USA RICE FEDERATION PAC**

Mailing Address 2101 WILSON BLVD, STE 610

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00308478

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 23 / 2016

**Transaction ID : SA11C.18594**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**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 153 OF 210
	<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)  
VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB (VERIZON PAC)

Mailing Address 1300 1 ST NW - 4TH FLOOR

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2016

**Transaction ID : SA11C.18609**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
WESTERN PEANUT GROWERS ASSOCIATION, INC. POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 252

City SEMINOLE State TX Zip Code 79360

FEC ID number of contributing federal political committee. **C** C00254847

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : SA11C.18627**

Amount of Each Receipt this Period  
 500.00

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).....

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

1500.00

96034.25

**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 154 OF 210
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CHASE CARD SERVICES**

Mailing Address PO BOX 94014

City PALATINE State IL Zip Code 60094

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1925.51

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 15 / 2016

**Transaction ID : SA14.19184**

Amount of Each Receipt this Period  
126.31

Memo Item  
VENDOR REBATE

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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).....

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

126.31

126.31

**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 155 OF 210
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**GARRET GRAVES FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. ASHLYN A GRAVES**

Mailing Address 1120 ROBERT ST

City State Zip Code  
NEW ORLEANS LA 70115-2912

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

Name of Employer Occupation  
EVANS-GRAVES ENGINEERS VP MARKETING

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 31 2016

**Transaction ID : SA15.19185**

Amount of Each Receipt this Period  
900.00

Memo Item  
SALE OF EVENT TICKETS - FAIR MARKET VALUE

**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

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 M / D 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).....

900.00

900.00

**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 156 OF 210	
	<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) <b>A. ACME OYSTER HOUSE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2016
Mailing Address 3535 PERKINS ROAD		Amount of Each Disbursement this Period 300.00
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement AMEX 02/29 PMT: FACILITY RENTAL/CATERING SERVICES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19049</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:		

Full Name (Last, First, Middle Initial) <b>B. ACQUA AL 2</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 212 7TH ST SE		Amount of Each Disbursement this Period 2254.20
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement AMEX 01/06 PMT: FACILITY RENTAL/CATERING SERVICES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.18945</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:		

Full Name (Last, First, Middle Initial) <b>C. ALBASHA GREEK &amp; LEBANESE RESTAURANT</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2016
Mailing Address 2561 CITIPLACE CT		Amount of Each Disbursement this Period 29.14
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: FOOD	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19050</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:		

<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 157 OF 210	
	<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) <b>A. AMAZON</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2016
Mailing Address 410 TERRY AVE N		Amount of Each Disbursement this Period 14.99
City SEATTLE	State WA Zip Code 98109	
Purpose of Disbursement AMEX 02/02 PMT: OFFICE SUPPLIES		<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.19023</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 4255 AMON CARTER BOULEVARD		Amount of Each Disbursement this Period 130.50
City FORT WORTH	State TX Zip Code 76155	
Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: AIR		<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18946</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 4255 AMON CARTER BOULEVARD		Amount of Each Disbursement this Period 130.50
City FORT WORTH	State TX Zip Code 76155	
Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: AIR		<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18947</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<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 158 OF 210	
	<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) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 4255 AMON CARTER BOULEVARD		Amount of Each Disbursement this Period 130.50
City FORT WORTH State TX Zip Code 76155	Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: AIR	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.18948</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 4255 AMON CARTER BOULEVARD		Amount of Each Disbursement this Period 130.50
City FORT WORTH State TX Zip Code 76155	Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: AIR	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.18949</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 4255 AMON CARTER BOULEVARD		Amount of Each Disbursement this Period 167.50
City FORT WORTH State TX Zip Code 76155	Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: AIR	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.18950</b>
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 159 OF 210	
	<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) <b>A. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015	
Mailing Address 4255 AMON CARTER BOULEVARD			Amount of Each Disbursement this Period 167.50	
City FORT WORTH	State TX	Zip Code 76155	Category/ Type	
Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: AIR				
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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)		Transaction ID : <b>SB17.18951</b>	
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015	
Mailing Address 4255 AMON CARTER BOULEVARD			Amount of Each Disbursement this Period 167.50	
City FORT WORTH	State TX	Zip Code 76155	Category/ Type	
Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: AIR				
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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)		Transaction ID : <b>SB17.18952</b>	
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015	
Mailing Address 4255 AMON CARTER BOULEVARD			Amount of Each Disbursement this Period 167.50	
City FORT WORTH	State TX	Zip Code 76155	Category/ Type	
Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: AIR				
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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)		Transaction ID : <b>SB17.18953</b>	
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 160 OF 210			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016		
Mailing Address 4255 AMON CARTER BOULEVARD			Amount of Each Disbursement this Period -167.50		
City FORT WORTH	State TX	Zip Code 76155	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.19051</b>		
Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: AIR		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. AMERICAN EXPRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2016		
Mailing Address P.O. BOX 360001			Amount of Each Disbursement this Period 10471.06		
City FORT LAUDERDALE	State FL	Zip Code 33336-0001	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.19152</b>		
Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMO ENTRIES		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. AMERICAN EXPRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2016		
Mailing Address P.O. BOX 360001			Amount of Each Disbursement this Period 2062.82		
City FORT LAUDERDALE	State FL	Zip Code 33336-0001	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.19153</b>		
Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMO ENTRIES		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12533.88
<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 161 OF 210	
	<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) <b>A. AMERICAN EXPRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2016	
Mailing Address P.O. BOX 360001			Amount of Each Disbursement this Period 5856.13	
City FORT LAUDERDALE	State FL	Zip Code 33336-0001	Memo Item <input type="checkbox"/>	
Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMO ENTRIES			Transaction ID : <b>SB17.19154</b>	
Candidate Name			Category/Type	
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. ANGELO'S COAL OVEN PIZZERIA</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2015	
Mailing Address 117 W 57TH ST			Amount of Each Disbursement this Period 55.91	
City NEW YORK	State NY	Zip Code 10019	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement AMEX 01/06 PMT: MEETING EXPENSE: MEALS			Transaction ID : <b>SB17.18955</b>	
Candidate Name			Category/Type	
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. APEX</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2016	
Mailing Address 138 CONANT STREET 2ND FLOOR			Amount of Each Disbursement this Period 60.00	
City BEVERLY	State MA	Zip Code 01915	Memo Item <input type="checkbox"/>	
Purpose of Disbursement MERCHANT FEES			Transaction ID : <b>SB17.19155</b>	
Candidate Name			Category/Type	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5916.13
<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 162 OF 210	
	<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) <b>A. APEX</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR		Amount of Each Disbursement this Period 60.00
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19156</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. APEX</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR		Amount of Each Disbursement this Period 20.00
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19157</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. APEX</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR		Amount of Each Disbursement this Period 40.00
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19158</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	120.00
<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 163 OF 210	
	<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) <b>A. APEX</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR		Amount of Each Disbursement this Period 188.00
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19159</b>
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. APEX</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR		Amount of Each Disbursement this Period 108.00
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19160</b>
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. APEX</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR		Amount of Each Disbursement this Period 40.00
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19161</b>
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	336.00
<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 164 OF 210			
	<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) <b>A. APEX</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2016		
Mailing Address 138 CONANT STREET 2ND FLOOR			Amount of Each Disbursement this Period 40.00		
City BEVERLY	State MA	Zip Code 01915	Memo Item <input type="checkbox"/>		
Purpose of Disbursement MERCHANT FEES		Candidate Name	Category/Type		
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)		Transaction ID : SB17.19162		
State: District:					

Full Name (Last, First, Middle Initial) <b>B. APEX</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016		
Mailing Address 138 CONANT STREET 2ND FLOOR			Amount of Each Disbursement this Period 256.20		
City BEVERLY	State MA	Zip Code 01915	Memo Item <input type="checkbox"/>		
Purpose of Disbursement MERCHANT FEES		Candidate Name	Category/Type		
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)		Transaction ID : SB17.19163		
State: District:					

Full Name (Last, First, Middle Initial) <b>C. APEX</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2016		
Mailing Address 138 CONANT STREET 2ND FLOOR			Amount of Each Disbursement this Period 100.00		
City BEVERLY	State MA	Zip Code 01915	Memo Item <input type="checkbox"/>		
Purpose of Disbursement MERCHANT FEES		Candidate Name	Category/Type		
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)		Transaction ID : SB17.19164		
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	396.20
<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 165 OF 210	
	<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) <b>A. APEX</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR		Amount of Each Disbursement this Period 20.00
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19165</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. APEX</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR		Amount of Each Disbursement this Period 148.20
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19166</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. APEX</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR		Amount of Each Disbursement this Period 20.00
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19167</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	188.20
<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 166 OF 210	
	<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) <b>A. APEX</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR		Amount of Each Disbursement this Period 108.00
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19168</b>
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. APEX</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR		Amount of Each Disbursement this Period 40.00
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19169</b>
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. APEX</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR		Amount of Each Disbursement this Period 10.00
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19170</b>
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	158.00
<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 167 OF 210	
	<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) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2015
Mailing Address 208 SOUTH AKARD STREET		Amount of Each Disbursement this Period 51.69
City DALLAS State TX Zip Code 75202	Purpose of Disbursement AMEX 01/06 PMT: MOBILE PHONE EXPENSE	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.18956</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016
Mailing Address 208 SOUTH AKARD STREET		Amount of Each Disbursement this Period 51.69
City DALLAS State TX Zip Code 75202	Purpose of Disbursement AMEX 02/02 PMT: MOBILE PHONE EXPENSE	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19024</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2016
Mailing Address 208 SOUTH AKARD STREET		Amount of Each Disbursement this Period 51.69
City DALLAS State TX Zip Code 75202	Purpose of Disbursement AMEX 02/29 PMT: MOBILE PHONE EXPENSE	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19052</b>
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 168 OF 210	
	<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) <b>A. AUDUBON CLUBHOUSE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 6500 MAGAZINE ST		Amount of Each Disbursement this Period 765.00
City NEW ORLEANS	State LA	
Zip Code 70118	Purpose of Disbursement AMEX 01/06 PMT: FACILITY RENTAL/CATERING SERVICES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.18958</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:		

Full Name (Last, First, Middle Initial) <b>B. BAUMS PERKINS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 10550 PERKINS RD		Amount of Each Disbursement this Period 24.47
City BATON ROUGE	State LA	
Zip Code 70810	Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: FOOD	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.18960</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:		

Full Name (Last, First, Middle Initial) <b>C. BERGERON ENTERPRISES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 714 JEFFERSON HWY		Amount of Each Disbursement this Period 107.37
City BATON ROUGE	State LA	
Zip Code 70806	Purpose of Disbursement AMEX 01/06 PMT: EVENT EXPENSE: FOOD & BEVERAGES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.18962</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:		

<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 169 OF 210	
	<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) <b>A. BEST BUY</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 3401 JEFFERSON DAVIS HWY		Amount of Each Disbursement this Period 21.19
City ALEXANDRIA	State VA Zip Code 22305	
Purpose of Disbursement AMEX 01/06 PMT: OFFICE SUPPLIES		<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.18964</b>
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. BIG MIKE'S SPORTS BAR &amp; GRILL</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2016
Mailing Address 123 ASPEN SQUARE		Amount of Each Disbursement this Period 18.00
City DENHAM SPRINGS	State LA Zip Code 70726	
Purpose of Disbursement AMEX 02/02 PMT: MEETING EXPENSE: MEALS		<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.19025</b>
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. BIG MIKE'S SPORTS BAR &amp; GRILL</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016
Mailing Address 123 ASPEN SQUARE		Amount of Each Disbursement this Period 16.88
City DENHAM SPRINGS	State LA Zip Code 70726	
Purpose of Disbursement AMEX 02/29 PMT: MEETING EXPENSE: MEALS		<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.19053</b>
State: District:	Category/Type	

<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 170 OF 210	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BOURBON STEAK</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 2800 PENNSYLVANIA AVE NW		Amount of Each Disbursement this Period 181.00
City WASHINGTON	State DC	
Zip Code 20007	Purpose of Disbursement AMEX 02/29 PMT: EVENT EXPENSE: FOOD & BEVERAGES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19055</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:		

Full Name (Last, First, Middle Initial) <b>B. JEFFREY BROOKS</b>		Date of Disbursement MM / DD / YYYY 01 / 23 / 2016
Mailing Address 5625 JAMES GUNNELL LANE		Amount of Each Disbursement this Period 1200.00
City ALEXANDRIA	State VA	
Zip Code 22310	Purpose of Disbursement IN-KIND: EVENT EXPENSE: REFRESHMENTS	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19187</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:		

Full Name (Last, First, Middle Initial) <b>C. MRS. LISA BROOKS</b>		Date of Disbursement MM / DD / YYYY 01 / 23 / 2016
Mailing Address 5605 JAMES GUNNELL LANE		Amount of Each Disbursement this Period 2700.00
City ALEXANDRIA	State VA	
Zip Code 22310	Purpose of Disbursement IN-KIND: EVENT EXPENSE: REFRESHMENTS	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19188</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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3900.00
<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 171 OF 210	
	<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) <b>A. CAFE AMERICAIN RESTAURANT</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2016
Mailing Address 7521 JEFFERSON HIGHWAY		Amount of Each Disbursement this Period 20.42
City BATON ROUGE	State LA	
Zip Code 70806	Purpose of Disbursement AMEX 02/02 PMT: MEETING EXPENSE: MEALS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.19027</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:		

Full Name (Last, First, Middle Initial) <b>B. CALCASIEU</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2016
Mailing Address 930A TCHOUPITOU LAS ST		Amount of Each Disbursement this Period 360.00
City NEW ORLEANS	State LA	
Zip Code 70130	Purpose of Disbursement AMEX 02/02 PMT: MEETING EXPENSE: MEALS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.19029</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:		

Full Name (Last, First, Middle Initial) <b>C. CALVIN'S BOCAGE MARKET</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 7675 JEFFERSON HWY		Amount of Each Disbursement this Period 149.07
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement AMEX 01/06 PMT: EVENT SUPPLIES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.18966</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:		

<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 172 OF 210	
	<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**

**A. CAPITOL HILL CLUB**

Full Name (Last, First, Middle Initial)  
Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement AMEX 01/06 PMT: MONTHLY CHARGES-EVENT EXPENSES-FOOD AND BEVERAGE  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 16 / 2015

Amount of Each Disbursement this Period: 1123.37

Memo Item

Transaction ID : SB17.18968

**B. CAPITOL HILL CLUB**

Full Name (Last, First, Middle Initial)  
Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement AMEX 01/06 PMT: MONTHLY CHARGES-EVENT EXPENSES-FOOD AND BEVERAGE  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 15 / 2015

Amount of Each Disbursement this Period: 38.61

Memo Item

Transaction ID : SB17.18967

**C. CAPITOL HILL CLUB**

Full Name (Last, First, Middle Initial)  
Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement AMEX 02/29 PMT: MONTHLY CHARGES-EVENT EXPENSES-FOOD AND BEVERAGE  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 15 / 2016

Amount of Each Disbursement this Period: 253.77

Memo Item

Transaction ID : SB17.19056

**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 173 OF 210	
	<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) <b>A. CAPITOLHOST</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address THE RAYBURN HOUSE		Amount of Each Disbursement this Period 55.85
City WASHINGTON State DC Zip Code 20515	Purpose of Disbursement AMEX 01/06 PMT: EVENT EXPENSE: FOOD & BEVERAGES	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.18970</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAPITOLHOST</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2016
Mailing Address THE RAYBURN HOUSE		Amount of Each Disbursement this Period 121.70
City WASHINGTON State DC Zip Code 20515	Purpose of Disbursement AMEX 02/29 PMT: EVENT EXPENSE: FOOD & BEVERAGES	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19057</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2016
Mailing Address 1445 LAUGHLIN AVE		Amount of Each Disbursement this Period 30.00
City MCLEAN State VA Zip Code 22101	Purpose of Disbursement BANK FEES	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19171</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	30.00
<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 174 OF 210	
	<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) <b>A. CHAIN BRIDGE BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2016
Mailing Address 1445 LAUGHLIN AVE		Amount of Each Disbursement this Period 30.00
City MCLEAN	State VA	
Zip Code 22101	Purpose of Disbursement BANK FEES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.19172</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:		

Full Name (Last, First, Middle Initial) <b>B. CHAIN BRIDGE BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 1445 LAUGHLIN AVE		Amount of Each Disbursement this Period 30.00
City MCLEAN	State VA	
Zip Code 22101	Purpose of Disbursement BANK FEES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.19173</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:		

Full Name (Last, First, Middle Initial) <b>C. CHEVRON</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2016
Mailing Address 1526 NORTH FOSTER DR		Amount of Each Disbursement this Period 26.05
City BATON ROUGE	State LA	
Zip Code 70805	Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: FUEL	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.19058</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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	60.00
<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 175 OF 210	
	<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) <b>A. CITY TRANSPORT MANAGEMENT</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2015
Mailing Address 5418 BROADWAY		Amount of Each Disbursement this Period 9.35
City WOODSIDE	State NY	
Zip Code 11377	Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: GROUND TRANSPORTATION	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.18973</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:		

Full Name (Last, First, Middle Initial) <b>B. COSTCO</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 1200 S FERN ST		Amount of Each Disbursement this Period 474.05
City ARLINGTON	State VA	
Zip Code 22202	Purpose of Disbursement AMEX 01/06 PMT: EVENT SUPPLIES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.18975</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:		

Full Name (Last, First, Middle Initial) <b>C. CURB</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 9.55
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: GROUND TRANSPORTATION	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.18992</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:		

<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 176 OF 210	
	<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) <b>A. CURB</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2016
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 14.27
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: GROUND TRANSPORTATION	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : SB17.19081</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DC TAXI</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 1636 BLADENSBURG ROAD NE		Amount of Each Disbursement this Period 18.96
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: GROUND TRANSPORTATION	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : SB17.18971</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DC TAXI</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 1636 BLADENSBURG ROAD NE		Amount of Each Disbursement this Period 9.96
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: GROUND TRANSPORTATION	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : SB17.18979</b>
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 177 OF 210	
	<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**

**A. DC TAXI**

Full Name (Last, First, Middle Initial)  
Mailing Address 1636 BLADENSBURG ROAD NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 22 / 2016

Amount of Each Disbursement this Period: 5.85

Memo Item

Transaction ID : SB17.19059

**B. DELTA AIRLINES**

Full Name (Last, First, Middle Initial)  
Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 02 / 2015

Amount of Each Disbursement this Period: 401.20

Memo Item

Transaction ID : SB17.18976

**C. DELTA AIRLINES**

Full Name (Last, First, Middle Initial)  
Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 02 / 2015

Amount of Each Disbursement this Period: 401.20

Memo Item

Transaction ID : SB17.18977

**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 178 OF 210	
	<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**

**A. DOE'S EAT PLACE**

Full Name (Last, First, Middle Initial)  
Mailing Address 3723 GOVERNMENT ST

City BATON ROUGE State LA Zip Code 70806

Purpose of Disbursement  
AMEX 02/02 PMT: EVENT EXPENSE: FOOD & BEVERAGES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 22 / 2015

Amount of Each Disbursement this Period: 290.85

Memo Item

Transaction ID : SB17.19032

**B. DON'S SEAFOOD HUT**

Full Name (Last, First, Middle Initial)  
Mailing Address 2405 WEST CABELA'S PARKWAY

City GONZALES State LA Zip Code 70737

Purpose of Disbursement  
AMEX 01/06 PMT: MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 20 / 2015

Amount of Each Disbursement this Period: 40.48

Memo Item

Transaction ID : SB17.18978

**C. EL PASO MEXICAN RESTRAUNT**

Full Name (Last, First, Middle Initial)  
Mailing Address 1900 NEW HIGHWAY 51

City LA PLACE State LA Zip Code 70068

Purpose of Disbursement  
AMEX 02/02 PMT: MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 10 / 2016

Amount of Each Disbursement this Period: 47.04

Memo Item

Transaction ID : SB17.19034

**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 179 OF 210	
	<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) <b>A. FEDEX</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 942 S SHADY GROVE RD		Amount of Each Disbursement this Period 187.02
City MEMPHIS State TN Zip Code 38120	Purpose of Disbursement AMEX 01/06 PMT: DELIVERY SERVICES	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.18980</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FEDEX</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 942 S SHADY GROVE RD		Amount of Each Disbursement this Period 11.98
City MEMPHIS State TN Zip Code 38120	Purpose of Disbursement AMEX 01/06 PMT: DELIVERY SERVICES	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.18981</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FILOMENA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2016
Mailing Address 1063 WISCONSIN AVE NW		Amount of Each Disbursement this Period 31.89
City WASHINGTON State DC Zip Code 20007	Purpose of Disbursement AMEX 02/29 PMT: MEETING EXPENSE: MEALS	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19061</b>
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 180 OF 210	
	<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) <b>A. GALVEZ SEAFOOD</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015	
Mailing Address 40306 HIGHWAY 42			Amount of Each Disbursement this Period 18.00	
City PRAIRIEVILLE	State LA	Zip Code 70769	Category/ Type	
Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: FOOD				
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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)		Transaction ID : <b>SB17.18983</b>	
State: District:				

Full Name (Last, First, Middle Initial) <b>B. GOGOAIR</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015	
Mailing Address 303 S TECHNOLOGY CT			Amount of Each Disbursement this Period 16.95	
City BROOMFIELD	State CO	Zip Code 80021	Category/ Type	
Purpose of Disbursement AMEX 02/02 PMT: TRAVEL: BROADBAND SERVICES				
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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)		Transaction ID : <b>SB17.19036</b>	
State: District:				

Full Name (Last, First, Middle Initial) <b>C. GOGOAIR</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2016	
Mailing Address 303 S TECHNOLOGY CT			Amount of Each Disbursement this Period 5.00	
City BROOMFIELD	State CO	Zip Code 80021	Category/ Type	
Purpose of Disbursement AMEX 02/02 PMT: TRAVEL: BROADBAND SERVICES				
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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)		Transaction ID : <b>SB17.19035</b>	
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 181 OF 210	
	<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) <b>A. GOGOAIR</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2016
Mailing Address 303 S TECHNOLOGY CT		Amount of Each Disbursement this Period 19.95
City BROOMFIELD	State CO	
Zip Code 80021	Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: BROADBAND SERVICES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
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)	<b>Transaction ID : SB17.19062</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GOOGLE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 1600 AMPHITHEATRE PKWY		Amount of Each Disbursement this Period 70.00
City MOUNTAIN VIEW	State CA	
Zip Code 94043	Purpose of Disbursement AMEX 01/06 PMT: EMAIL SERVICES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
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)	<b>Transaction ID : SB17.18984</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. GOOGLE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2016
Mailing Address 1600 AMPHITHEATRE PKWY		Amount of Each Disbursement this Period 70.00
City MOUNTAIN VIEW	State CA	
Zip Code 94043	Purpose of Disbursement AMEX 02/02 PMT: EMAIL SERVICES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
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)	<b>Transaction ID : SB17.19037</b>
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 182 OF 210	
	<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) <b>A. GOOGLE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016
Mailing Address 1600 AMPHITHEATRE PKWY		Amount of Each Disbursement this Period 70.00
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement AMEX 02/29 PMT: EMAIL SERVICES	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19063</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CARISSA GRAVES</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2016
Mailing Address 1967 OLEANDER ST.		Amount of Each Disbursement this Period 112.60
City BATON ROUGE State LA Zip Code 70806	Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTIRES	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19145</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PARK 'N FLY</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2016
Mailing Address 1017 AIRLINE DR		Amount of Each Disbursement this Period 65.40
City KENNER State LA Zip Code 70062	Purpose of Disbursement GRAVES REIMBURSEMENT: PARKING EXPENSE	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19145.0</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	112.60
<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 183 OF 210	
	<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)  
**GARRET GRAVES FOR CONGRESS**

**A. DC TAXI**

Full Name (Last, First, Middle Initial)  
Mailing Address 1636 BLADENSBURG ROAD NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
GRAVES REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 01 / 17 / 2016

Amount of Each Disbursement this Period: 47.20

Memo Item

Transaction ID : SB17.19145.1

**B. CARISSA GRAVES**

Full Name (Last, First, Middle Initial)  
Mailing Address 1967 OLEANDER ST.

City BATON ROUGE State LA Zip Code 70806

Purpose of Disbursement  
REIMBURSEMENT: SEE MEMO ENTIRES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 02 / 23 / 2016

Amount of Each Disbursement this Period: 9.64

Memo Item

Transaction ID : SB17.19146

**C. UBER**

Full Name (Last, First, Middle Initial)  
Mailing Address 1455 MARKET STREET

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement  
GRAVES REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 02 / 23 / 2016

Amount of Each Disbursement this Period: 9.64

Memo Item

Transaction ID : SB17.19146.0

**SUBTOTAL** of Disbursements This Page (optional)..... 9.64

**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 184 OF 210	
	<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) <b>A. GARRET CHRISTOPHER GRAVES</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016	
Mailing Address 1112 DAINES DR			Amount of Each Disbursement this Period 750.00	
City TEMPLE CITY	State CA	Zip Code 91780	Memo Item <input type="checkbox"/>	
Purpose of Disbursement DOMAIN ACQUISITION		Candidate Name	Transaction ID : <b>SB17.19148</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		

Full Name (Last, First, Middle Initial) <b>B. GULA GRAHAM</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2016	
Mailing Address 499 S CAPITOL ST SW STE 420			Amount of Each Disbursement this Period 34132.89	
City WASHINGTON	State DC	Zip Code 20003	Memo Item <input type="checkbox"/>	
Purpose of Disbursement FUNDRAISING CONSULTING		Candidate Name	Transaction ID : <b>SB17.19175</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		

Full Name (Last, First, Middle Initial) <b>C. GULF PARTYLINE</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016	
Mailing Address 4000 LAKE BEAU PRE BLVD #63			Amount of Each Disbursement this Period 1650.00	
City BATON ROUGE	State LA	Zip Code 70820	Memo Item <input type="checkbox"/>	
Purpose of Disbursement WEB DEVELOPMENT		Candidate Name	Transaction ID : <b>SB17.19176</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		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	36532.89
<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 185 OF 210	
	<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**

**A. GULF PARTYLINE**

Full Name (Last, First, Middle Initial)  
Mailing Address 4000 LAKE BEAU PRE BLVD #63

City: BATON ROUGE State: LA Zip Code: 70820

Purpose of Disbursement: WEB DEVELOPMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 23 / 2016

Amount of Each Disbursement this Period: 3300.00

Memo Item

Transaction ID : SB17.19177

**B. H-LOTTE NEW YORK PALACE**

Full Name (Last, First, Middle Initial)  
Mailing Address 455 MADISON AVE

City: NEW YORK State: NY Zip Code: 10022

Purpose of Disbursement: AMEX 01/06 PMT: PARKING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 06 / 2015

Amount of Each Disbursement this Period: 17.69

Memo Item

Transaction ID : SB17.18990

**C. HAMPTON INN**

Full Name (Last, First, Middle Initial)  
Mailing Address 105 STADIUM DR

City: KODAK State: TN Zip Code: 37764

Purpose of Disbursement: AMEX 01/06 PMT: TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 11 / 2015

Amount of Each Disbursement this Period: 752.28

Memo Item

Transaction ID : SB17.18986

**SUBTOTAL** of Disbursements This Page (optional) ..... 3300.00

**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 186 OF 210	
	<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) <b>A. MR. JEFF HARRISON</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2016	
Mailing Address 316 PENNSYLVANIA AVE, SE SUITE 401			Amount of Each Disbursement this Period 521.99	
City WASHINGTON	State DC	Zip Code 20003	Memo Item <input type="checkbox"/>	
Purpose of Disbursement IN-KIND: CATERING SERVICES		Category/ Type	Transaction ID : <b>SB17.19186</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. HARRIS TEETER</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2016	
Mailing Address 1350 POTOMAC AVE			Amount of Each Disbursement this Period 29.52	
City WASHINGTON	State DC	Zip Code 20003	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement AMEX 02/29 PMT: EVENT SUPPLIES		Category/ Type	Transaction ID : <b>SB17.19064</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. HILTON</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016	
Mailing Address TWO POYDRAS STREET			Amount of Each Disbursement this Period 387.41	
City NEW ORLEANS	State LA	Zip Code 70130	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: LODGING		Category/ Type	Transaction ID : <b>SB17.19067</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	521.99
<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 187 OF 210	
	<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) <b>A. HILTON</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016	
Mailing Address TWO POYDRAS STREET			Amount of Each Disbursement this Period 1162.24	
City NEW ORLEANS	State LA	Zip Code 70130	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.19068</b>	
Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: LODGING		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. HILTON</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2016	
Mailing Address TWO POYDRAS STREET			Amount of Each Disbursement this Period 330.00	
City NEW ORLEANS	State LA	Zip Code 70130	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.19069</b>	
Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: LODGING		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. HILTON</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2016	
Mailing Address TWO POYDRAS STREET			Amount of Each Disbursement this Period 463.41	
City NEW ORLEANS	State LA	Zip Code 70130	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.19066</b>	
Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: LODGING		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<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 188 OF 210			
	<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) <b>A. HILTON</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2016
Mailing Address TWO POYDRAS STREET		Amount of Each Disbursement this Period -346.42
City NEW ORLEANS	State LA	
Zip Code 70130	Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: LODGING	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19065</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:		

Full Name (Last, First, Middle Initial) <b>B. HILTON HOTELS</b>		Date of Disbursement MM / DD / YYYY 01 / 22 / 2016
Mailing Address 1919 CONNECTICUT AVE NW		Amount of Each Disbursement this Period 204.96
City WASHINGTON	State DC	
Zip Code 20009	Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: LODGING	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19073</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:		

Full Name (Last, First, Middle Initial) <b>C. HILTON HOTELS</b>		Date of Disbursement MM / DD / YYYY 01 / 24 / 2016
Mailing Address 1919 CONNECTICUT AVE NW		Amount of Each Disbursement this Period 123.00
City WASHINGTON	State DC	
Zip Code 20009	Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: LODGING	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19074</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:		

<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 189 OF 210	
	<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) <b>A. HILTON HOTELS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2016
Mailing Address 1919 CONNECTICUT AVE NW		Amount of Each Disbursement this Period 147.00
City WASHINGTON State DC Zip Code 20009	Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: LODGING	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19072</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HILTON HOTELS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2016
Mailing Address 1919 CONNECTICUT AVE NW		Amount of Each Disbursement this Period -204.96
City WASHINGTON State DC Zip Code 20009	Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: LODGING	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19070</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. HILTON HOTELS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2016
Mailing Address 1919 CONNECTICUT AVE NW		Amount of Each Disbursement this Period 202.67
City WASHINGTON State DC Zip Code 20009	Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: LODGING	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19071</b>
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 190 OF 210	
	<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) <b>A. HILTON MANHATTAN EAST</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2015	
Mailing Address 304 EAST 42ND STREET			Amount of Each Disbursement this Period 415.45	
City NEW YORK	State NY	Zip Code 10017	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18988</b>	
Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: LODGING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. MR. BRYAN JONES</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2016	
Mailing Address 2164 HOLLYDALE AVENUE			Amount of Each Disbursement this Period 437.31	
City BATON ROUGE	State LA	Zip Code 70808	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.19192</b>	
Purpose of Disbursement IN-KIND: FOOD AND BEVERAGES FOR BREAKFAST EVENT		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. MR. KEVIN KELLY</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address 40136 HIGHWAY 942			Amount of Each Disbursement this Period 1100.00	
City DARROW	State LA	Zip Code 70725	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.19189</b>	
Purpose of Disbursement IN-KIND: FACILITY RENTAL/CATERING SERVICES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1537.31
<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 191 OF 210	
	<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) <b>A. MAILCHIMP</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 512 MEANS STREET SUITE 404		Amount of Each Disbursement this Period 75.00
City ATLANTA State GA Zip Code 30318	Purpose of Disbursement AMEX 01/06 PMT: EMAIL SERVICES Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.18991</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MAILCHIMP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015
Mailing Address 512 MEANS STREET SUITE 404		Amount of Each Disbursement this Period 75.00
City ATLANTA State GA Zip Code 30318	Purpose of Disbursement AMEX 02/02 PMT: EMAIL SERVICES Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19040</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MAILCHIMP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2016
Mailing Address 512 MEANS STREET SUITE 404		Amount of Each Disbursement this Period 75.00
City ATLANTA State GA Zip Code 30318	Purpose of Disbursement AMEX 02/29 PMT: EMAIL SERVICES Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19075</b>
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 192 OF 210	
	<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) <b>A. MA MAMA`S KITCHEN</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2016
Mailing Address 124 W MAIN ST		Amount of Each Disbursement this Period 40.88
City NEW ROADS	State LA	
Zip Code 70760	Purpose of Disbursement AMEX 02/02 PMT: MEETING EXPENSE: MEALS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19039</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:		

Full Name (Last, First, Middle Initial) <b>B. MICHAELS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2016
Mailing Address 6330 SEVEN CORNERS CTR		Amount of Each Disbursement this Period 8.46
City FALLS CHURCH	State VA	
Zip Code 22044	Purpose of Disbursement AMEX 02/29 PMT: EVENT SUPPLIES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19077</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:		

Full Name (Last, First, Middle Initial) <b>C. NATIONAL CUSTOM INSIGNIA</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 1676 ARABIAN LN		Amount of Each Disbursement this Period 402.00
City PALM HARBOR	State FL	
Zip Code 34685	Purpose of Disbursement AMEX 02/02 PMT: CAMPAIGN PROMOTIONAL ITEMS: LAPEL PINS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19042</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:		

<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 193 OF 210	
	<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**

**A. NOHSC UPTOWN**

Full Name (Last, First, Middle Initial)  
Mailing Address 4141 SAINT CHARLES AVE

City NEW ORLEANS State LA Zip Code 70115

Purpose of Disbursement  
AMEX 02/29 PMT: MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 06 / 2016

Amount of Each Disbursement this Period: 45.00

Memo Item

Transaction ID : SB17.19079

**B. NOTHING BUNDT CAKES 57**

Full Name (Last, First, Middle Initial)  
Mailing Address 7620 CORPORATE BLVD

City BATON ROUGE State LA Zip Code 70809

Purpose of Disbursement  
AMEX 02/02 PMT: MEETING EXPENSE: MEALS

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 18 / 2015

Amount of Each Disbursement this Period: 19.89

Memo Item

Transaction ID : SB17.19043

**C. NRCC**

Full Name (Last, First, Middle Initial)  
Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
AMEX 02/02 PMT: EVENT REGISTRATION FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 17 / 2015

Amount of Each Disbursement this Period: 390.00

Memo Item

Transaction ID : SB17.19030

**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 194 OF 210	
	<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) <b>A. NUNGESSER CONSULTING</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2016
Mailing Address 1554 LOBDELL AVENUE		Amount of Each Disbursement this Period 21,332.41
City BATON ROUGE	State LA	
Zip Code 70806	Purpose of Disbursement FUNDRAISING CONSULTING	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19179</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:		

Full Name (Last, First, Middle Initial) <b>B. NUNGESSER CONSULTING</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2016
Mailing Address 1554 LOBDELL AVENUE		Amount of Each Disbursement this Period 9,814.88
City BATON ROUGE	State LA	
Zip Code 70806	Purpose of Disbursement FUNDRAISING CONSULTING	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19180</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:		

Full Name (Last, First, Middle Initial) <b>C. NYC TAXI</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2015
Mailing Address 3108 NORTHERN BLVD		Amount of Each Disbursement this Period 21.35
City LONG ISLAND CITY	State NY	
Zip Code 11101	Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: GROUND TRANSPORTATION	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19020</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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	21332.41
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 195 OF 210	
	<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) <b>A. OFFICE DEPOT</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016
Mailing Address 3116 COLLEGE DR		Amount of Each Disbursement this Period 120.95
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement AMEX 02/29 PMT: OFFICE SUPPLIES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19080</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:		

Full Name (Last, First, Middle Initial) <b>B. OLSON FOR CONGRESS COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2016
Mailing Address PO BOX 16381		Amount of Each Disbursement this Period 1134.25
City SUGAR LAND	State TX	
Zip Code 77496	Purpose of Disbursement IN-KIND: FACILITY RENTAL/CATERING SERVICES/PARKING	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19191</b>
Office Sought: <input checked="" 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: TX District: 22		

Full Name (Last, First, Middle Initial) <b>C. OSTERIA LAGUNA RESTAURANT</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 209 E 42ND ST		Amount of Each Disbursement this Period 75.24
City NEW YORK	State NY	
Zip Code 10017	Purpose of Disbursement AMEX 01/06 PMT: EVENT EXPENSE: FOOD & BEVERAGES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.18994</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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1134.25
<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 196 OF 210	
	<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) <b>A. PARK HYATT WASHINGTON</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2016
Mailing Address 1201 24TH ST NW		Amount of Each Disbursement this Period 458.40
City WASHINGTON State DC Zip Code 20037	Purpose of Disbursement AMEX 02/29 PMT: FACILITY RENTAL/CATERING SERVICES	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19083</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NANCY PEELE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2016
Mailing Address 2821 SOUTH WAKEFIELD STREET UNIT E		Amount of Each Disbursement this Period 5000.00
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement FUNDRAISING CONSULTING	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19149</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NANCY PEELE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2016
Mailing Address 2821 SOUTH WAKEFIELD STREET UNIT E		Amount of Each Disbursement this Period 5000.00
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement FUNDRAISING CONSULTING	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19150</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10000.00
<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 197 OF 210	
	<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) <b>A. NANCY PEELE</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016
Mailing Address 2821 SOUTH WAKEFIELD STREET UNIT E		Amount of Each Disbursement this Period 8500.00
City ARLINGTON	State VA	
Zip Code 22206	Purpose of Disbursement FUNDRAISING CONSULTING	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19151</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:		

Full Name (Last, First, Middle Initial) <b>B. PREMIUM PARKING</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2015
Mailing Address 740 CARONDELET ST P0153		Amount of Each Disbursement this Period 25.00
City NEW ORLEANS	State LA	
Zip Code 70112	Purpose of Disbursement AMEX 01/06 PMT: PARKING EXPENSE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.18995</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:		

Full Name (Last, First, Middle Initial) <b>C. PREMIUM PARKING</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2015
Mailing Address 740 CARONDELET ST P0153		Amount of Each Disbursement this Period 15.00
City NEW ORLEANS	State LA	
Zip Code 70112	Purpose of Disbursement AMEX 01/06 PMT: PARKING EXPENSE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.18996</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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8500.00
<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 198 OF 210			
	<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) <b>A. QUEENS MEDALLION TAXI</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 2103 44TH AVE			Amount of Each Disbursement this Period 11.16
City LONG ISLAND CITY	State NY	Zip Code 11101	
Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: GROUND TRANSPORTATION		Category/ Type	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.18998</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. RED CURVE SOLUTIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR			Amount of Each Disbursement this Period 2478.43
City BEVERLY	State MA	Zip Code 01915	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.19181</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. RED CURVE SOLUTIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR			Amount of Each Disbursement this Period 2436.05
City BEVERLY	State MA	Zip Code 01915	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.19182</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4914.48
<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 199 OF 210	
	<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) <b>A. REGINELLI'S PIZZERIA</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 684 JEFFERSON HWY		Amount of Each Disbursement this Period 112.62
City BATON ROUGE	State LA	
Zip Code 70806		<input checked="" type="checkbox"/> Memo Item
Purpose of Disbursement AMEX 01/06 PMT: EVENT EXPENSE: FOOD & BEVERAGES		
Candidate Name		Transaction ID : <b>SB17.18999</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: _____	

Full Name (Last, First, Middle Initial) <b>B. REPUBLICAN WOMEN OF BATON ROUGE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015
Mailing Address 1664 SILLIMAN DRIVE		Amount of Each Disbursement this Period 20.00
City BATON ROUGE	State LA	
Zip Code 70808		<input checked="" type="checkbox"/> Memo Item
Purpose of Disbursement AMEX 01/06 PMT: EVENT REGISTRATION FEE		
Candidate Name		Transaction ID : <b>SB17.19001</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: _____	

Full Name (Last, First, Middle Initial) <b>C. ROCK-N-SAKE BAR &amp; SUSHI</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address 3043 PERKINS RD		Amount of Each Disbursement this Period 36.61
City BATON ROUGE	State LA	
Zip Code 70808		<input checked="" type="checkbox"/> Memo Item
Purpose of Disbursement AMEX 01/06 PMT: MEETING EXPENSE: MEALS		
Candidate Name		Transaction ID : <b>SB17.19003</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: _____	

<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 200 OF 210	
	<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) <b>A. RUTH'S CHRIS STEAK HOUSE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2016
Mailing Address 1801 CONNECTICUT AVE NW		Amount of Each Disbursement this Period 361.43
City WASHINGTON State DC Zip Code 20009	Purpose of Disbursement AMEX 02/29 PMT: EVENT EXPENSE: FOOD & BEVERAGES	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19085</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SENATE GIFT SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2016
Mailing Address DIRKSEN SENATE OFFICE		Amount of Each Disbursement this Period 30.00
City WASHINGTON State DC Zip Code 20510	Purpose of Disbursement AMEX 02/29 PMT: SPECIAL GUESTS MEMENTOS	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19087</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SENATE GIFT SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2016
Mailing Address DIRKSEN SENATE OFFICE		Amount of Each Disbursement this Period 182.50
City WASHINGTON State DC Zip Code 20510	Purpose of Disbursement AMEX 02/29 PMT: SPECIAL GUESTS MEMENTOS	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19088</b>
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 201 OF 210	
	<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) <b>A. SHELL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 3536 DRUSILLA LANE		Amount of Each Disbursement this Period 16.94
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: FUEL	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : SB17.19005</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SHELL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2015
Mailing Address 3536 DRUSILLA LANE		Amount of Each Disbursement this Period 24.11
City BATON ROUGE	State LA	
Zip Code 70809	Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: FUEL	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : SB17.19004</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SOBOU RESTARUANT</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2016
Mailing Address 316 CHATRES ST		Amount of Each Disbursement this Period 145.20
City NEW ORLEANS	State LA	
Zip Code 70130	Purpose of Disbursement AMEX 02/29 PMT: EVENT EXPENSE: FOOD & BEVERAGES	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : SB17.19098</b>
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 202 OF 210	
	<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) <b>A. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015	
Mailing Address 2702 LOVE FIELD DRIVE			Amount of Each Disbursement this Period 374.96	
City DALLAS	State TX	Zip Code 75235	Category/ Type	
Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: AIR				
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.19006	
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. STEINWAY EXPRESS MANAGEMENT</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2015	
Mailing Address 3606 STEINWAY ST			Amount of Each Disbursement this Period 24.95	
City LONG ISLAND CITY	State NY	Zip Code 11101	Category/ Type	
Purpose of Disbursement AMEX 01/06 PMT: TRAVEL: GROUND TRANSPORTATION				
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.19008	
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. STOR-IT MINI WAREHOUSES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015	
Mailing Address 3147 COLLEGE DRIVE			Amount of Each Disbursement this Period 80.00	
City BATON ROUGE	State LA	Zip Code 70808	Category/ Type	
Purpose of Disbursement AMEX 01/06 PMT: STORAGE SPACE RENTAL				
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.19009	
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 203 OF 210	
	<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) <b>A. STOR-IT MINI WAREHOUSES</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2016
Mailing Address 3147 COLLEGE DRIVE		Amount of Each Disbursement this Period 80.00
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement AMEX 02/02 PMT: STORAGE SPACE RENTAL	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : SB17.19044</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. STOR-IT MINI WAREHOUSES</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2016
Mailing Address 3147 COLLEGE DRIVE		Amount of Each Disbursement this Period 80.00
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement AMEX 02/29 PMT: STORAGE SPACE RENTAL	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : SB17.19089</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. T-MOBILE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 3132 COLLEGE DR VILLAGE SQUARE SHOPPING CENTER		Amount of Each Disbursement this Period 33.90
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement AMEX 01/06 PMT: MOBILE PHONE EXPENSE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : SB17.19014</b>
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 204 OF 210	
	<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) <b>A. T-MOBILE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2016
Mailing Address 3132 COLLEGE DR VILLAGE SQUARE SHOPPING CENTER		Amount of Each Disbursement this Period 33.90
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement AMEX 02/02 PMT: MOBILE PHONE EXPENSE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : SB17.19047</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. T-MOBILE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2016
Mailing Address 3132 COLLEGE DR VILLAGE SQUARE SHOPPING CENTER		Amount of Each Disbursement this Period 34.01
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement AMEX 02/29 PMT: MOBILE PHONE EXPENSE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : SB17.19095</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TACOMBI</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2015
Mailing Address 267 ELIZABETH ST		Amount of Each Disbursement this Period 52.07
City NEW YORK	State NY	
Zip Code 10012	Purpose of Disbursement AMEX 01/06 PMT: MEETING EXPENSE: MEALS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : SB17.19011</b>
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 205 OF 210	
	<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) <b>A. TEDS' BULLETIN</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2016
Mailing Address 505 8TH ST SE		Amount of Each Disbursement this Period 115.38
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement AMEX 02/02 PMT: MEETING EXPENSE: MEALS	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19046</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE CAPITAL GRILLE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2016
Mailing Address 601 PENNSYLVANIA AVE NW		Amount of Each Disbursement this Period 235.95
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement AMEX 02/29 PMT: EVENT EXPENSE: FOOD & BEVERAGES	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19091</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE CAPITAL HILTON</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2016
Mailing Address 1001 16TH STREET NW		Amount of Each Disbursement this Period 204.96
City WASHINGTON State DC Zip Code 20036	Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: LODGING	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19094</b>
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 206 OF 210	
	<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) <b>A. THE CAPITAL HILTON</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2016	
Mailing Address 1001 16TH STREET NW			Amount of Each Disbursement this Period 409.92	
City WASHINGTON	State DC	Zip Code 20036	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.19093</b>	
Purpose of Disbursement AMEX 02/29 PMT: TRAVEL: LODGING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. THE HAMILTON</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2015	
Mailing Address 600 14TH STREET NW			Amount of Each Disbursement this Period 37.08	
City WASHINGTON	State DC	Zip Code 20005	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : SB17.19013</b>	
Purpose of Disbursement AMEX 01/06 PMT: MEETING EXPENSE: MEALS		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. THE POLITICAL FIRM</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2016	
Mailing Address 5555 HILTON AVE., SUITE 203			Amount of Each Disbursement this Period 4487.75	
City BATON ROUGE	State LA	Zip Code 70808	<input type="checkbox"/> Memo Item <b>Transaction ID : SB17.19183</b>	
Purpose of Disbursement COMMUNICATIONS CONSULTING & DESIGN SERVICES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4487.75
<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 207 OF 210	
	<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) <b>A. TORTILLA COAST</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 400 1ST ST SE		Amount of Each Disbursement this Period 59.99
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement AMEX 01/06 PMT: MEETING EXPENSE: MEALS	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19015</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TRADER JOE'S</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 3535 PERKINS RD		Amount of Each Disbursement this Period 117.33
City BATON ROUGE State LA Zip Code 70808	Purpose of Disbursement AMEX 01/06 PMT: EVENT SUPPLIES	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.19017</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TRIUMPH KITCHEN</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2015
Mailing Address 3897 GOVERNMENT ST.		Amount of Each Disbursement this Period 300.00
City BATON ROUGE State LA Zip Code 70806	Purpose of Disbursement AMEX 01/06 PMT: CATERING SERVICES	
Candidate Name	Category/Type	<input checked="" type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.18944</b>
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 208 OF 210	
	<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) <b>A. UBER CONFERENCE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 275 SACRAMENTO ST		Amount of Each Disbursement this Period 11.12
City SAN FRANCISCO	State CA	
Zip Code 94111	Purpose of Disbursement AMEX 01/06 PMT: TELECONFERENCE FEE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19018</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:		

Full Name (Last, First, Middle Initial) <b>B. UBER CONFERENCE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016
Mailing Address 275 SACRAMENTO ST		Amount of Each Disbursement this Period 10.83
City SAN FRANCISCO	State CA	
Zip Code 94111	Purpose of Disbursement AMEX 02/02 PMT: TELECONFERENCE FEE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19048</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:		

Full Name (Last, First, Middle Initial) <b>C. UBER CONFERENCE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2016
Mailing Address 275 SACRAMENTO ST		Amount of Each Disbursement this Period 10.83
City SAN FRANCISCO	State CA	
Zip Code 94111	Purpose of Disbursement AMEX 02/29 PMT: TELECONFERENCE FEE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.19096</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:		

<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 209 OF 210	
	<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) <b>A. WALMART SUPERCENTER</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 702 SW 8TH ST		Amount of Each Disbursement this Period 149.18
City BENTONVILLE	State AR Zip Code 72716	
Purpose of Disbursement AMEX 01/06 PMT: OFFICE SUPPLIES		<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.19021</b>
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. ZAYTINYA</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2015
Mailing Address 701 9TH STREET NW		Amount of Each Disbursement this Period 121.55
City WASHINGTON	State DC Zip Code 20001	
Purpose of Disbursement AMEX 01/06 PMT: MEETING EXPENSE: MEALS		<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.19022</b>
State: District:	Category/Type	

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		<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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	116021.73

**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 210 OF 210	
	<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)  
**GARRET GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CONSOLIDATED RESOURCE MANAGEMENT, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2016	
Mailing Address P.O. BOX 6917			Amount of Each Disbursement this Period 1000.00	
City METAIRIE	State LA	Zip Code 70009	Memo Item <input type="checkbox"/>	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type		
Candidate Name			Transaction ID : <b>SB20A.19174</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: _____			

Full Name (Last, First, Middle Initial) <b>B. LANEY C PRODUCTION LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016	
Mailing Address PO BOX 2340			Amount of Each Disbursement this Period 2700.00	
City MARRERO	State LA	Zip Code 70073	Memo Item <input type="checkbox"/>	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type		
Candidate Name			Transaction ID : <b>SB20A.19178</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: _____			

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	Memo Item <input type="checkbox"/>	
Purpose of Disbursement		Category/ Type		
Candidate Name			Transaction ID : _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3700.00
<b>TOTAL</b> This Period (last page this line number only).....	3700.00