

# 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  
**Barr Congress Inc.**

ADDRESS (number and street) PO Box 675217  
 Check if different than previously reported. (ACC) Marietta GA 30006

2. **FEC IDENTIFICATION NUMBER** C00543405 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY STATE ZIP CODE STATE DISTRICT  
GA 11

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 through M M / D D / Y Y Y Y  
01 / 01 / 2014 through 03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Craig Dowdy  
Signature of Treasurer Craig Dowdy *[Electronically Filed]* Date M M / D D / Y Y Y Y  
04 / 15 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Barr Congress Inc.**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	102505.39	641529.62
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	2600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	102505.39	638929.62
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	91416.73	532997.39
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	66.79
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	91416.73	532930.60
8. Cash on Hand at Close of Reporting Period (from Line 27).....	124963.11	
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).....	20000.00	

**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

**Barr Congress Inc.**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	79188.00	484031.32
(ii) Unitemized.....	17417.39	119148.30
(iii) TOTAL of contributions from individuals ▶	96605.39	603179.62
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5500.00	37950.00
(d) The Candidate.....	400.00	400.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	102505.39	641529.62
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	20000.00	20000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	20000.00	20000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	66.79
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	9.09	9.09
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	122514.48	661605.50

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	91416.73	532997.39
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	2600.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	2600.00
21. OTHER DISBURSEMENTS .....	0.00	1045.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	91416.73	536642.39

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	93865.36
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	122514.48
25. SUBTOTAL (add Line 23 and Line 24).....	216379.84
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	91416.73
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	124963.11

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3N  
Transaction ID :

Form/Schedule:  
Transaction ID:

**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 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Patricia Tumlin**

Mailing Address 2660 Marleigh Farm Rd.

City Kennesaw State GA Zip Code 30152-6520

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

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

**Transaction ID : AFFC26AC58C624714996**

Amount of Each Receipt this Period  
**300.00**

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

Mailing Address 8733 Vintner Way

City Indianapolis State IN Zip Code 46256-9375

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

Name of Employer Tau Kappa Epsilon Fraternity Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 05 / 2014

**Transaction ID : A04BA33B05EC149F0871**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Gary Brock**

Mailing Address 3475 Roxboro Rd.

City Atlanta State GA Zip Code 30326-3314

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

Name of Employer Self Employed Occupation Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014

**Transaction ID : A4A1453B5BAAC41A5A17**

Amount of Each Receipt this Period  
**250.00**

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

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

**1050.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Joshua Duke**

Mailing Address 8343 E Via de Encanto

City State Zip Code  
Scottsdale AZ 85258-3808

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

Name of Employer Occupation  
Austin Electric, Inc. Finance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : AE7AD77D5DF704FCDA92**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4723 Holly Oak Pl.

City State Zip Code  
Atlanta GA 30338-5651

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : A95315508217F41B9BB2**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Susan Bryg**

Mailing Address 512 Fairway Drive

City State Zip Code  
Woodstock GA 30189-6196

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

Name of Employer Occupation  
Self Employed Professional Photographer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
740.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2014

**Transaction ID : A8862BA4EB3654714889**

Amount of Each Receipt this Period  
675.00  
In-kind:Photography

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

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

1425.00

**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 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Darrell Baxter**

Mailing Address 293 Wylstream Pl.

City Marietta	State GA	Zip Code 30064-1569
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FEC ID number of contributing federal political committee. **C**

Name of Employer Peach State Insurance	Occupation President
---	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 05 / 2014

**Transaction ID : ABBB6E28009134087841**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Charlotte McGhee**

Mailing Address 3651 N Karen Ct

City Decatur	State IL	Zip Code 62526-1431
-----------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 28 / 2014

**Transaction ID : AB7A1180C2AB34E08A02**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**James Rhoden**

Mailing Address 1985 N Park Pl SE

City Atlanta	State GA	Zip Code 30339-2004
-----------------	-------------	------------------------

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

Name of Employer Futren Corporation	Occupation Chairman
--	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : AB69AF6AE1FB6485A948**

Amount of Each Receipt this Period  
500.00

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

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

600.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Robert D'Agostino**

Mailing Address 32 Brandon Ridge Dr.

City Atlanta State GA Zip Code 30328-2136

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

Name of Employer John Marshall Law School Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 06 / 2014

**Transaction ID : AEA22F7530B504182AC7**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Francis X. Ryan**

Mailing Address 1273 Ash Ln.

City Lebanon State PA Zip Code 17042-9618

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

Name of Employer F.X. Ryan & Associates Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2014

**Transaction ID : A8F4D331F557545648A0**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 7 Bitterroot Ln

City Savannah State GA Zip Code 31419-9507

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

Name of Employer Gulfstream Aerospace Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : AC490AD84B2DD4244B4F**

Amount of Each Receipt this Period  
100.00

**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 10 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Morgan**

Mailing Address 741 Cheatham Hill Trl SW

City	State	Zip Code
Marietta	GA	30064-2754

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

Name of Employer	Occupation
Cerqueda, Morgan and Collins LLP	Managing Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 10 / 2014

**Transaction ID : A6F7DC6188F274546946**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Taz L. Anderson Jr.**

Mailing Address 2931 Paces Ferry Rd. Ste. 150

City	State	Zip Code
Atlanta	GA	30339-3735

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

Name of Employer	Occupation
Taz Anderson Realty Co	Developer

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff2014

Election Cycle-to-Date  
2850.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 06 / 2014

**Transaction ID : A26F4AF50EB3E49A2BA3**

Amount of Each Receipt this Period  
250.00

Redesignation Pending

**C.** Full Name (Last, First, Middle Initial)  
**Doug Pendergast**

Mailing Address 1 W. Muscogee Ave.

City	State	Zip Code
Atlanta	GA	30305-3544

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

Name of Employer	Occupation
The Krystal Co.	CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : A4AD636E291844FE0913**

Amount of Each Receipt this Period  
500.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Sidney Theus**

Mailing Address 2981 Grey Moss Pass

City Duluth State GA Zip Code 30097-6274

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

Name of Employer American Painting & Renovations Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 08 / 2014

**Transaction ID : ABCE2661ED9EF4E8898F**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 269 Saint Patrick Dr SW

City Mableton State GA Zip Code 30126-1626

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

Name of Employer Interactive College of Technology Occupation College Administration

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : A1EBA4945176C4A7E851**

Amount of Each Receipt this Period  
 150.00

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

Mailing Address 20193 SOUTHWOOD OAKS DR

City Porter State TX Zip Code 77365-7225

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2014

**Transaction ID : A6F3BFA55A49B4B72AB2**

Amount of Each Receipt this Period  
 150.00

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

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

1300.00

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

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

FOR LINE NUMBER: PAGE 12 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

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

Mailing Address 311 Seminole Dr.

City Marietta State GA Zip Code 30060-1238

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

Name of Employer Croy Engineering Occupation Managing Partner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 06 / 2014

**Transaction ID : AA958552775984B68993**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Elizabeth K. Toulon**

Mailing Address PO Box 666

City Koloa State HI Zip Code 96756-0666

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
285.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2014

**Transaction ID : AD560D1A925C043DC96B**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 255 E Paces Ferry Rd NE Ste 300

City Atlanta State GA Zip Code 30305-2244

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

Name of Employer Royal Capital Corp Occupation CEO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
6200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : AAB1245F0DA22452A972**

Amount of Each Receipt this Period  
1000.00  
Redesignation Pending

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**John Blend**

Mailing Address 705 Lake Summit Dr., NE

City Atlanta State GA Zip Code 30342-1971

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

Name of Employer Goshen Capital Partners Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A1EE8AD9E47704E2D835**

Amount of Each Receipt this Period  
1000.00

Redesignation Pending

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Lawrence Mills**

Mailing Address 119 Adams Ct

City Kamiah State ID Zip Code 83536-5143

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
313.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 28 / 2014

**Transaction ID : A418B258DC32C40008C6**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Brandon Hewatt**

Mailing Address 2115 Tee Dr.

City Braselton State GA Zip Code 30517-4026

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

Name of Employer US Auto Sales Occupation Purchasing Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

**Transaction ID : A3673291DE22A415791F**

Amount of Each Receipt this Period  
250.00

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

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

1275.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Louis Brown**

Mailing Address 4415 Northside Pkwy NW  
Apt 157

City Atlanta State GA Zip Code 30327-5227

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

Name of Employer Wealth & Pension Services Group Occupation Investment Advisor

Receipt For: 2014  
 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 / 2014**

**Transaction ID : A6F49BFE7F1894DB8AE4**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Fowler**

Mailing Address PO Box 532

City Woodstock State GA Zip Code 30188-0532

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

Name of Employer Fowler Properties Inc. Occupation Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1325.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : ADF2796BFC61541F1927**

Amount of Each Receipt this Period  
**325.00**

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

Mailing Address 2881 Peachtree Rd. NE #704

City Atlanta State GA Zip Code 30305-5101

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

Name of Employer The Graham Private Client Law Group Occupation Founder & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : A26AC440E3FCA4591AFA**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1575.00**

**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 15 OF 108

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

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

Mailing Address 12014 S 44th St.

City Phoenix State AZ Zip Code 85044-2432

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

Name of Employer AIE Occupation Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : AE49B342740994C7C9ED**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Gus Charara**

Mailing Address 7238 N. 23rd Street

City Phoenix State AZ Zip Code 85020-5614

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

Name of Employer JP Morgan Occupation Banker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : AA3B75AEFDABF4790BA8**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Scott Tonn**

Mailing Address 5625 E Sanna St.

City Paradise Valley State AZ Zip Code 85253-1757

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : AA3F924CD607245DB934**

Amount of Each Receipt this Period  
 1000.00

**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 16 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Pano Karatassos**

Mailing Address 265 Pharr Rd NE

City Atlanta State GA Zip Code 30305-2225

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

Name of Employer: Buckhead Life Restaurant Group  
Occupation: President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 20 / 2014

**Transaction ID : A637A887E94DB4DBFBD1**

Amount of Each Receipt this Period  
 1350.00

In-kind: Event Catering

**B.** Full Name (Last, First, Middle Initial)  
**Virginia Killorin**

Mailing Address 436 Blackland Rd NW

City Atlanta State GA Zip Code 30342-4005

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

Name of Employer: Self Employed  
Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 05 / 2014

**Transaction ID : A67E1ACE8B3334A329D5**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jerry Cooper**

Mailing Address 3348 Callenwolde Court, NE

City Roswell State GA Zip Code 30075-5237

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

Name of Employer: Cherokee County  
Occupation: County Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AA38B051FAEA64B1BA83**

Amount of Each Receipt this Period  
 250.00

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

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

1850.00



**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 108
	<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)  
**Barr Congress Inc.**

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

Mailing Address 12190 Charlotte Dr.

City Alpharetta	State GA	Zip Code 30004-1402
--------------------	-------------	------------------------

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

Name of Employer N. Ga Pain Clinic	Occupation Physician
---------------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff2014

Election Cycle-to-Date  
7800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 19 / 2014

**Transaction ID : A75EA7A69C7464E948B3**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 4708 Polo Ln. SE

City Atlanta	State GA	Zip Code 30339-5328
-----------------	-------------	------------------------

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

Name of Employer Voyles Dealership	Occupation Owner
---------------------------------------	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : A0DFB5705C0B4203AC1**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Jeremy Sorenson**

Mailing Address 5330 W 700 N

City Larwill	State IN	Zip Code 46764-9736
-----------------	-------------	------------------------

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

Name of Employer ExpressJet	Occupation Pilot
--------------------------------	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
517.76

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 20 / 2014

**Transaction ID : AF1B12EA28AAC47F7A50**

Amount of Each Receipt this Period  
500.00

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

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

3600.00

**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 108
	<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)  
**Barr Congress Inc.**

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

Mailing Address 28024 N 15th Dr.

City Phoenix	State AZ	Zip Code 85085-5378
-----------------	-------------	------------------------

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

Name of Employer Austin Electric, Inc.	Occupation Contractor
---	--------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : A60463904ADD340B8B8F**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 766 Tate Overlook

City Marietta	State GA	Zip Code 30064-2078
------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 06 / 2014

**Transaction ID : AF36C6F91AEED4A68A48**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Glenn Brock**

Mailing Address 4804 Upper Brandon Pl.

City Marietta	State GA	Zip Code 30068-2140
------------------	-------------	------------------------

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

Name of Employer Nelson Mullins Riley and Scarborough,	Occupation Attorney
---	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 24 / 2014

**Transaction ID : A7D3F18F2901A4FA0983**

Amount of Each Receipt this Period  
250.00

**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 19 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Terry Raber**

Mailing Address 517 Huntleigh Dr.

City State Zip Code  
Winder GA 30680-7477

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

Name of Employer Occupation  
Carl Police Department Police Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : A727DBCE84A3744F7929**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Duane Hawkins**

Mailing Address 1830 Providence Place Dr.

City State Zip Code  
Alpharetta GA 30009-3563

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**525.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 05 / 2014**

**Transaction ID : A68D066DA72E94111B62**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Fred Shaftman**

Mailing Address 10 Highland Valley Ct.

City State Zip Code  
Atlanta GA 30327-4880

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 18 / 2014**

**Transaction ID : A5A9BBF67CF6F4DFA8EB**

Amount of Each Receipt this Period  
**2600.00**

**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 20 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. William A. Walsh**

Mailing Address 906 Santa Hidalgo

City Solana Beach State CA Zip Code 92075-1557

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 03 / 2014**

**Transaction ID : AC11D8375842F49F39AC**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Elizabeth K. Toulon**

Mailing Address PO Box 666

City Koloa State HI Zip Code 96756-0666

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **385.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 27 / 2014**

**Transaction ID : A9E94B8BF6727460A86F**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Paul Wilkerson**

Mailing Address 1610 Austin Bridge Rd.

City Douglasville State GA Zip Code 30134-5131

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 10 / 2014**

**Transaction ID : AEE80CC855C784A43893**

Amount of Each Receipt this Period  
**250.00**

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

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

**550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 108
	<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)  
**Barr Congress Inc.**

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

Mailing Address 1835 River Falls Dr

City Roswell	State GA	Zip Code 30076-5114
-----------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Attorney
-----------------------------------	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 10 / 2014

**Transaction ID : A29545A39156A47DF94F**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Elaine Z. Feldberg**

Mailing Address 2971 Paces Lake Dr.

City Atlanta	State GA	Zip Code 30339-4210
-----------------	-------------	------------------------

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

Name of Employer Repro Products	Occupation HR Manager
------------------------------------	--------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 07 / 2014

**Transaction ID : AA111F0B08DD847D2901**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Betty Crawford**

Mailing Address 601 ASPEN TRL

City Muscatine	State IA	Zip Code 52761-2873
-------------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 28 / 2014

**Transaction ID : A742FF13053434853882**

Amount of Each Receipt this Period  
100.00

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

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

1650.00

**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 22 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Lydia Howren**

Mailing Address 1820 Macland Woods Drive

City Powder Springs State GA Zip Code 30127-5404

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : A84770E462EC2423A81F**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Camilla Ellenburg**

Mailing Address 47 Sherwood Ln SE

City Marietta State GA Zip Code 30067-4035

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

Name of Employer Howard's Furniture Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1399.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A76BA71DE05F14EF88AF**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Joseph Guerra**

Mailing Address 80 Summerhill Pl

City Newnan State GA Zip Code 30263-3359

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 28 / 2014**

**Transaction ID : A8615E8AF5AF04B75A7A**

Amount of Each Receipt this Period  
**250.00**

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

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

**1350.00**

**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 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Harry C. Rawlins**

Mailing Address 1800 Kings Rd

City State Zip Code  
Newport Beach CA 92663-5003

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : ACA60064F02FB434AA1C**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Susan Kublanow**

Mailing Address 7355 Village Creek Trce

City State Zip Code  
Atlanta GA 30328-6761

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : AD453159B165741E6B34**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jeffrey Kunkes**

Mailing Address 5585 Errol Pl. NW

City State Zip Code  
Atlanta GA 30327-4872

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

Name of Employer Information Requested Occupation Information Requested  
Kunkes Ear, Nose and Throat Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : AA62B184A7A3F418FA5F**

Amount of Each Receipt this Period  
300.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 108
	<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)  
**Barr Congress Inc.**

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

Mailing Address 45 Stonington Pl

City Marietta State GA Zip Code 30068-3770

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

Name of Employer Self Employed Occupation Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AA12693D3E43E499286C**

Amount of Each Receipt this Period  
 1000.00

1600.00

**B.** Full Name (Last, First, Middle Initial)  
**Eugene Klingaman**

Mailing Address 5770 W 700 N

City Larwill State IN Zip Code 46764-9738

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014

**Transaction ID : ADE16A1DAD32944C7B04**

Amount of Each Receipt this Period  
 2000.00

2000.00

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

Mailing Address 1574 Cave Rd., NW

City Atlanta State GA Zip Code 30327-3120

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

Name of Employer Batory Foods Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014

**Transaction ID : AC94D3BE2F7F34167923**

Amount of Each Receipt this Period  
 250.00

500.00

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

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

3250.00



**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 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Jorge Delgado**

Mailing Address 801 Pennsylvania Av NW  
Apt 1006

City Washington State DC Zip Code 20004-2617

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1027.76**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 18 / 2014**

**Transaction ID : A9E41E5F089D9446CADF**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Robert Dernehl**

Mailing Address 981 Mining Trl

City Young Harris State GA Zip Code 30582

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

Name of Employer The Dernehl Company Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A28C77E71ED4C4046A47**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Ted W. Bereswill**

Mailing Address 3315 Robinhood St

City Houston State TX Zip Code 77005-2225

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 23 / 2014**

**Transaction ID : AB07AFE2F2CE44515A02**

Amount of Each Receipt this Period  
**500.00**

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

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

**2000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Susan Brunoff**

Mailing Address 334 W Cedar St

City State Zip Code  
New Holland PA 17557-1202

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
220.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2014

**Transaction ID : AF163C23790204EB5AB4**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Larry Miller**

Mailing Address 720 Atlanta Country Club Dr.

City State Zip Code  
Marietta GA 30067-4718

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 13 / 2014

**Transaction ID : A98EDA72DF9684BE78E0**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert D. Spratlin II**

Mailing Address 240 Cherokee St NE  
Ste 201

City State Zip Code  
Marietta GA 30060-1628

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

Name of Employer Occupation  
Spratlin Media President/GM

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2150.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 10 / 2014

**Transaction ID : A708EC8A0DE354A14B95**

Amount of Each Receipt this Period  
250.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robert K. Haning**

Mailing Address 5675 Ponderosa Dr Apt 315

City Columbus State OH Zip Code 43231-6764

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 31 / 2014**

**Transaction ID : A9137C1AD84C04023A05**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 22025 E Highway 20

City Bend State OR Zip Code 97701-9405

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 30 / 2014**

**Transaction ID : ABC31AB2BA65A4B7387C**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Charles Henderson**

Mailing Address 1195 La Moree Rd Spc 34

City San Marcos State CA Zip Code 92078-4527

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **395.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 28 / 2014**

**Transaction ID : AA52AFCB89C50412DA97**

Amount of Each Receipt this Period  
**20.00**

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

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

**370.00**

**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 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Lynn Wilson**

Mailing Address 2900 Dallas Nebo Rd.

City Hiram State GA Zip Code 30141-5300

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

Name of Employer Wilson AC Service Inc. Occupation HVAC

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 05 / 2014

**Transaction ID : AECB52C2FFFF94B978C8**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Daniel J. Galloway**

Mailing Address 1055 MURRAY CIR SW

City Marietta State GA Zip Code 30064-3927

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

Name of Employer AT&T Occupation Computer Professional

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
570.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 30 / 2014

**Transaction ID : A69ED9B30807949C883C**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Wes Latimer**

Mailing Address 729 Crescent Circle

City Canton State GA Zip Code 30115-4772

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

Name of Employer Latimer Construction Company Occupation General Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A11CCD3D62BC14E5AA0F**

Amount of Each Receipt this Period  
250.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Sprague**

Mailing Address 345 W 32nd Street

City Yuma State AZ Zip Code 85364-8107

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

Name of Employer Spragues Sports Occupation Sporting Goods

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : A4B381D0475504A1487B**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**John Bobbitt**

Mailing Address 8115 Summer Wind Ct.

City Sugar Land State TX Zip Code 77479-7020

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

Name of Employer Knowledge Lab Consulting Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **636.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A5E567DE52C37438FBB9**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Susan Kelley**

Mailing Address 3675 Glennvale Ct.

City Cumming State GA Zip Code 30041-7390

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : A23738305CB034A69A8A**

Amount of Each Receipt this Period  
**250.00**

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

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

**525.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Samuel Fletcher**

Mailing Address 1307 Pebble Creek Road SE

City Marietta	State GA	Zip Code 30067-5435
------------------	-------------	------------------------

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

Name of Employer Martin Product Sales	Occupation Director of Sales
--	---------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
221.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 04 / 2014

**Transaction ID : AEBE2B190F5234E8B848**

Amount of Each Receipt this Period  
111.00

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

Mailing Address 1718 Peachtree St.

City Atlanta	State GA	Zip Code 30309-2452
-----------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Attorney
-----------------------------------	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : AAD8827964800462FB11**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Charles Cooper**

Mailing Address 105 Kaula Ln.

City Bonita Springs	State FL	Zip Code 34134-8524
------------------------	-------------	------------------------

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

Name of Employer Cooper and Kirk, PLLC	Occupation Attorney
---	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : ACDF1C2E732454819A25**

Amount of Each Receipt this Period  
500.00

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

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

1111.00

**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 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Denise Straus**

Mailing Address 12190 Charlotte Dr

City State Zip Code  
Alpharetta GA 30004-1402

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

Name of Employer Occupation  
North Georgia Pain Clinic Manager

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff2014

Election Cycle-to-Date  
**7800.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**01 / 19 / 2014**

**Transaction ID : A6A2F00DB2B6743668FE**

Amount of Each Receipt this Period  
**2600.00**

**B.** Full Name (Last, First, Middle Initial)  
**Thomas A. Blair Jr.**

Mailing Address 2313 Deeside SE

City State Zip Code  
Conyers GA 30013-6471

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

Name of Employer Occupation  
Interactive College of Technology College Dean

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**850.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**02 / 24 / 2014**

**Transaction ID : A884B054B3D7A4574B81**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph Hickox**

Mailing Address 3708 Delena Farm Rd

City State Zip Code  
Douglasville GA 30135-2842

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**03 / 18 / 2014**

**Transaction ID : AE56C2E66ADE7445FA37**

Amount of Each Receipt this Period  
**50.00**

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

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

**2900.00**

**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 108
	<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)  
**Barr Congress Inc.**

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

Mailing Address 2874 Wendover St.

City State Zip Code  
Marietta GA 30062-1452

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

Name of Employer Occupation  
Edward-Johns Jewelers Jeweler

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : A250FC2561ED04B5BBBD**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Donald Tapia**

Mailing Address 4805 E Roadrunner Rd

City State Zip Code  
Paradise Valley AZ 85253-3020

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 24 / 2014

**Transaction ID : A2B595DDE096541ABA45**

Amount of Each Receipt this Period  
2600.00

Redesignation Pending

**C.** Full Name (Last, First, Middle Initial)  
**Ignatius Karatassos**

Mailing Address 920 S. Powers Ct NW

City State Zip Code  
Atlanta GA 30327-4763

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

Name of Employer Occupation  
Buckhead Life Restaurant Group Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 26 / 2014

**Transaction ID : A7CE685E2930B47A2B7E**

Amount of Each Receipt this Period  
500.00

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

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

3350.00



**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 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Curtis Katz**

Mailing Address 29 Barstow Rd Ste 202

City	State	Zip Code
Great Neck	NY	11021-2209

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

Name of Employer Information Requested	Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
540.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AFCE3610F77704A55B93**

Amount of Each Receipt this Period  
180.00

**B.** Full Name (Last, First, Middle Initial)  
**John A Williams**

Mailing Address 3625 Cumberland Blvd Suite 1150

City	State	Zip Code
Atlanta	GA	30339-6410

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

Name of Employer Preferred Apartment Communities	Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : A9CB5EB95F1F94061B3E**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 28024 N 15th Dr.

City	State	Zip Code
Phoenix	AZ	85085-5378

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

Name of Employer Austin Electric, Inc.	Occupation Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : A977D39693A454C78B76**

Amount of Each Receipt this Period  
250.00

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

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

730.00

**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 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Taz L. Anderson Jr.**

Mailing Address 2931 Paces Ferry Rd. Ste. 150

City Atlanta	State GA	Zip Code 30339-3735
-----------------	-------------	------------------------

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

Name of Employer Taz Anderson Realty Co	Occupation Developer
--	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff2014

Election Cycle-to-Date  
 \_\_\_\_\_ 3850.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : ACC84F8A42D62468FB49**

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

**B.** Full Name (Last, First, Middle Initial)  
**Jennifer Davis**

Mailing Address 701 Sterling Reserve

City Canton	State GA	Zip Code 30115-1878
----------------	-------------	------------------------

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

Name of Employer Morris, Hardwick, Schnieder	Occupation Attorney
---	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A3195BF010873430289A**

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

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

Mailing Address 8115 Summer Wind Ct.

City Sugar Land	State TX	Zip Code 77479-7020
--------------------	-------------	------------------------

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

Name of Employer Knowledge Lab Consulting	Occupation Consultant
--	--------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 611.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 04 / 2014

**Transaction ID : A8D5F24E5A99A484CBA7**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 111.00

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

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

\_\_\_\_\_ 1361.00

\_\_\_\_\_

**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 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Scott Banister**

Mailing Address **PO Box 997**

City **Half Moon Bay** State **CA** Zip Code **94019-0997**

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

Name of Employer Information Requested  
**None** Occupation Information Requested  
**Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

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

**Transaction ID : A967F9979B542479993E**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Elloine M. Clark**

Mailing Address **3838 Oak Lawn Ave**

City **Dallas** State **TX** Zip Code **75219-4520**

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

Name of Employer Information Requested  
**None** Occupation Information Requested  
**Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 18 / 2014**

**Transaction ID : AFCEC102F97B24843B33**

Amount of Each Receipt this Period  
**2600.00**

Redesignation Pending

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Lawrence Mills**

Mailing Address **119 Adams Ct**

City **Kamah** State **ID** Zip Code **83536-5143**

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

Name of Employer Information Requested  
**None** Occupation Information Requested  
**Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**238.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 09 / 2014**

**Transaction ID : ACD0D2E8C5FE04FD6B44**

Amount of Each Receipt this Period  
**20.00**

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

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

**3620.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**John Reagan**

Mailing Address 627 Grant St SE

City Atlanta State GA Zip Code 30312-3146

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : AB21F542D41E94DBDAD6**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Patricia Tumlin**

Mailing Address 2660 Marleigh Farm Rd.

City Kennesaw State GA Zip Code 30152-6520

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AF3EC3F0A427F44E6B90**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Anthony Patak**

Mailing Address 622 Owl Creek Dr.

City Powder Springs State GA Zip Code 30127-6251

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

Name of Employer Patak Meats Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2014

**Transaction ID : A6E8E9E8CA7D745F4816**

Amount of Each Receipt this Period  
 500.00

**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 37 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Frank A. Smith Jr.**

Mailing Address 2952 Mount Wilkinson Parkway #414

City Atlanta	State GA	Zip Code 30339-3632
-----------------	-------------	------------------------

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

Name of Employer Soho Cafe	Occupation Restaurateur
-------------------------------	----------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
335.00

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

**Transaction ID : AC2EB4C690B144C80808**

Amount of Each Receipt this Period  
335.00

In-kind: Event Catering

**B.** Full Name (Last, First, Middle Initial)  
**Gail Vogel**

Mailing Address 1320 Revere Cir.

City Marietta	State GA	Zip Code 30062
------------------	-------------	-------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 07 / 2014

**Transaction ID : ABF2161EF6BD0408A947**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Sue M. Cannon**

Mailing Address 6420 W Lakeridge Rd

City Lakewood	State CO	Zip Code 80227-3909
------------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 28 / 2014

**Transaction ID : A671D77CC900C4FDBAE2**

Amount of Each Receipt this Period  
850.00

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

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

2185.00

**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 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**John Oxendine**

Mailing Address 5375 Chelsen Wood Drive

City State Zip Code  
Duluth GA 30097-2435

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

Name of Employer Occupation  
John Oxendine PC Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 20 / 2014

**Transaction ID : A0B0FFA220B6B4085B47**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 127 N Lakeside Dr NW

City State Zip Code  
Kennesaw GA 30144-3094

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2100.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 27 / 2014

**Transaction ID : AF0DFA4A5948A4DE3917**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Richard C. Hubbard**

Mailing Address PO Box 195

City State Zip Code  
Butte Falls OR 97522-0195

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 27 / 2014

**Transaction ID : A480179B595174EDBB6C**

Amount of Each Receipt this Period  
100.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**William J Smith Jr.**

Mailing Address 4856 Clark Lake Way NW

City Acworth State GA Zip Code 30102-3515

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 24 / 2014**

**Transaction ID : A05C440B210104E869D7**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 79 Walker Ln

City Abington State MA Zip Code 02351-1562

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

Name of Employer The Ashcoft Law Firm Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2014**

**Transaction ID : A72A3B349FBAC4085A10**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jim Hester**

Mailing Address 5572 Cathers Creek Drive

City Hiram State GA Zip Code 30141-2857

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

Name of Employer Freedom Fire Equipment Occupation Fire Apparatus Specialist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 04 / 2014**

**Transaction ID : A1972E01B362945FE8BF**

Amount of Each Receipt this Period  
**250.00**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Martin R. Harris**

Mailing Address 41 Granburg Cir

City San Antonio State TX Zip Code 78218-3029

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 31 / 2014**

**Transaction ID : A46842061403043D5ADC**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Deborah Daniels**

Mailing Address 7304 Riley Ct.

City Indianapolis State IN Zip Code 46250-2518

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

Name of Employer Information Requested Occupation Information Requested  
 Krieg DeVault, LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 17 / 2014**

**Transaction ID : A73B5FDB5699F4508A01**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Francis B Gallagher**

Mailing Address 1110 Franklin Ln

City Rockaway State NJ Zip Code 07866-5812

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : ACAA7C111AECE4FFF832**

Amount of Each Receipt this Period  
**100.00**

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

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

**600.00**



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

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

FOR LINE NUMBER: PAGE 41 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Brent Wilkinson**

Mailing Address 4895 Walnut Grove

City State Zip Code  
Alpharetta GA 30022-6209

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

Name of Employer Occupation  
Windham Brannon CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : AB02A1C92D62C40F8B46**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jayne Hall**

Mailing Address 1812 Rosedale Dr.

City State Zip Code  
Edmond OK 73013-6638

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

Name of Employer Occupation  
H&H Shooting Sports Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : A701CBA4E48C743B5B76**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Gloria Theodoroff**

Mailing Address 41360 Fox Run Apt 520

City State Zip Code  
Novi MI 48377-5014

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 28 / 2014

**Transaction ID : A66B634E8BCEF499DAEE**

Amount of Each Receipt this Period  
200.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Gary Rollins**

Mailing Address **PO Box 647**

City **Atlanta** State **GA** Zip Code **30301-0647**

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

Name of Employer **Rollins, Inc.** Occupation **Vice Chairman/CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

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

**Transaction ID : AFF81AFFAA8C6475E874**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mark Chastain**

Mailing Address **3680 Rembrandt Rd.**

City **Atlanta** State **GA** Zip Code **30327-2640**

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

Name of Employer **Skin Cancer Specialists, P.C.** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

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

**Transaction ID : A32D92B1518DA4AF3B34**

Amount of Each Receipt this Period  
**750.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Eugene Choate**

Mailing Address **821 Stone Edge Ct**

City **Marietta** State **GA** Zip Code **30068-2564**

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

Name of Employer **Bankers Fidelity Life Insurance** Occupation **Insurance**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 27 / 2014**

**Transaction ID : AAD749653C0274687930**

Amount of Each Receipt this Period  
**100.00**

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

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

**1850.00**

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

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

FOR LINE NUMBER: PAGE 43 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Gail Vogel Barr**

Mailing Address 4320 Revere Cir

City State Zip Code  
Marietta GA 30062-5770

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

Name of Employer Occupation  
DEA Registration Program Specialist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 31 2014

**Transaction ID : A6137DC75A67647ECA5C**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Glenn Posey**

Mailing Address 4908 S 313th PI

City State Zip Code  
Auburn WA 98001-3716

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

Name of Employer Occupation  
Boeing Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 30 2014

**Transaction ID : AA82C1AA969E74C76827**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Daniel J. Galloway**

Mailing Address 1055 MURRAY CIR SW

City State Zip Code  
Marietta GA 30064-3927

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

Name of Employer Occupation  
AT&T Computer Professional

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
470.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 25 2014

**Transaction ID : A2D4335ED7B8247939CD**

Amount of Each Receipt this Period  
20.00

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

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

1120.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Dale W. Salsgiver**

Mailing Address 213 North Poplar St  
PO Box 205

City State Zip Code  
Dayton PA 16222-0205

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**330.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**01 / 30 / 2014**

**Transaction ID : AF27D1840403C43779F4**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Eugene Choate**

Mailing Address 821 Stone Edge Ct

City State Zip Code  
Marietta GA 30068-2564

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

Name of Employer Occupation  
Bankers Fidelity Life Insurance Insurance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1600.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**02 / 10 / 2014**

**Transaction ID : A3380B1F7ACEA4C14ACD**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 318 Chase Ln.

City State Zip Code  
Marietta GA 30068-3516

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

Name of Employer Occupation  
Hoitink & Dubuc P.C. Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**03 / 07 / 2014**

**Transaction ID : A9A9FD8E65F1C4E49B97**

Amount of Each Receipt this Period  
**250.00**

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

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

**800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Elmer Hogue**

Mailing Address 257 Madeline Way

City Blairsville State GA Zip Code 30512-2646

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 10 / 2014

**Transaction ID : AAA5C5B5FD43C4C338B4**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 115 Ardsley Run

City Canton State GA Zip Code 30115-7083

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : AB639E7663A904658947**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 12190 Charlotte Dr.

City Alpharetta State GA Zip Code 30004-1402

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

Name of Employer N. Ga Pain Clinic Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 19 / 2014

**Transaction ID : A15E7F89B8AB748999F9**

Amount of Each Receipt this Period  
 2600.00

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

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

5450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Denise Straus**

Mailing Address 12190 Charlotte Dr

City State Zip Code  
Alpharetta GA 30004-1402

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

Name of Employer Occupation  
North Georgia Pain Clinic Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7800.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 19 / 2014**

**Transaction ID : A4071F96B2347483D87D**

Amount of Each Receipt this Period  
**2600.00**

**B.** Full Name (Last, First, Middle Initial)  
**Daniel J. Galloway**

Mailing Address 1055 MURRAY CIR SW

City State Zip Code  
Marietta GA 30064-3927

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

Name of Employer Occupation  
AT&T Computer Professional

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 05 / 2014**

**Transaction ID : A8512371F50D147669FD**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**John L. Copeland**

Mailing Address 1346 Garrick Way

City State Zip Code  
Marietta GA 30068-2168

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

Name of Employer Occupation  
J. Copeland Realty LLC Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 10 / 2014**

**Transaction ID : A1DD5475209A1416C907**

Amount of Each Receipt this Period  
**500.00**

**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)	PAGE 47 OF 108
	<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)  
**Barr Congress Inc.**

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

Mailing Address 5400 Goolsby Way

City State Zip Code  
Fairfax VA 22030-6356

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

Name of Employer Occupation  
Self Employed Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**6700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : A2CA4C2B22F8B4F68AEE**

Amount of Each Receipt this Period  
**1500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Marsha Crowder**

Mailing Address 325 McDaniel Rd NW

City State Zip Code  
Marietta GA 30064-2090

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

Name of Employer Occupation  
Crowder Realty Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 10 / 2014**

**Transaction ID : A6E5521BEEAAC48FE845**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Beau Munhollow**

Mailing Address 1843 E Circle Mountain Rd.

City State Zip Code  
New River AZ 85087-7593

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

Name of Employer Occupation  
National Guard CPT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 24 / 2014**

**Transaction ID : A635BE9B0DDFA4CB0800**

Amount of Each Receipt this Period  
**500.00**

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

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

**2100.00**

**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 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Nancy Teets**

Mailing Address 5303 East Desert Park Ln

City State Zip Code  
Paradise Valley AZ 85253-3057

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 13 / 2014

**Transaction ID : AC9DF94BAA1824282A1F**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 3715 Northside Pkwy NW  
Ste 150

City State Zip Code  
Atlanta GA 30327-2806

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

Name of Employer Occupation  
The Espy Company Managing Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : A862A36ED93EB4B8696A**

Amount of Each Receipt this Period  
600.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Dale W. Salsgiver**

Mailing Address 213 North Poplar St  
PO Box 205

City State Zip Code  
Dayton PA 16222-0205

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
355.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 24 / 2014

**Transaction ID : AB8DAC22459604BABA11**

Amount of Each Receipt this Period  
25.00

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

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

1125.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Vanderlinde**

Mailing Address 6801 E Beryl Ave.

City Paradise Valley State AZ Zip Code 85253-1333

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : A84262752B1064C459AC**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Beryle D. Morgan**

Mailing Address 1909 Weeping Willow St

City Burleson State TX Zip Code 76028-6618

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 03 / 2014

**Transaction ID : AB72F952652C64BF2B56**

Amount of Each Receipt this Period  
 35.00

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

Mailing Address PO Box 1068

City Canton State GA Zip Code 30169-1068

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

Name of Employer Information Requested Occupation Information Requested  
 PWC Enterprises Inc Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A67241CD3183B4829B2C**

Amount of Each Receipt this Period  
 250.00

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

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

1285.00

**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 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robin A. Burruss**

Mailing Address 594 Keeler Woods Dr. NW

City Marietta State GA Zip Code 30064-2023

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

Name of Employer Tip Top Poultry, Inc. Occupation President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 04 / 2014

**Transaction ID : A3E347880E6564C3FBEF**

Amount of Each Receipt this Period  
 1000.00

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Olivia McFadden**

Mailing Address 11011 N Zephyr Dr Unit 111

City Fountain Hills State AZ Zip Code 85268-5505

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : AECCEF3F7256A4172AE9**

Amount of Each Receipt this Period  
 100.00

100.00

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

Mailing Address 111 Russell Rd.

City Roswell State GA Zip Code 30075-1123

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : AB718AC0D2C2144079F**

Amount of Each Receipt this Period  
 250.00

250.00

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

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

1350.00

**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 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph Hickox**

Mailing Address 3708 Delena Farm Rd

City Douglasville State GA Zip Code 30135-2842

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 31 / 2014**

**Transaction ID : A72B9AD32EE20420A805**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 724 E Grinnell Dr

City Burbank State CA Zip Code 91501-1720

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

Name of Employer Information Requested Occupation Information Requested

Dept. of Justice of the State of Calif Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **243.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 18 / 2014**

**Transaction ID : A486CF818485342ACB88**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Pete Motolenich**

Mailing Address 4471 Chattahoochee Plantation Dr.

City Marietta State GA Zip Code 30067-4673

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

Name of Employer Information Requested Occupation Information Requested

Ambulatory Anesthesia of Atlanta Anesthesiologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 12 / 2014**

**Transaction ID : AA815024A2463428CB32**

Amount of Each Receipt this Period  
**500.00**

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

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

**600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Eugene Bensch**

Mailing Address 1204 Village Ln.

City Roswell State GA Zip Code 30075-5894

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : ACD9C47606BC74136BDD**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**John Vogel**

Mailing Address 4320 Revere Cir.

City Marietta State GA Zip Code 30062-5770

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : AC58D4DB4DD3B493A82C**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 3270 Winthrop Cir.

City Marietta State GA Zip Code 30067-5109

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

Name of Employer East End Partners Occupation Sports Marketing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 04 / 2014

**Transaction ID : AE1200E701FE44C88A73**

Amount of Each Receipt this Period  
 250.00

**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 53 OF 108
	<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)  
**Barr Congress Inc.**

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

Mailing Address 30551 County Hwy B

City Lone Rock State WI Zip Code 53556-5002

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **205.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : ABD39061FF0924A708F2**

Amount of Each Receipt this Period  
**20.00**

**B.** Full Name (Last, First, Middle Initial)  
**Robert Beard**

Mailing Address PO Box 166

City Marietta State GA Zip Code 30061-0166

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **211.00**

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

**Transaction ID : ACBF04FAD8CF149D7AE1**

Amount of Each Receipt this Period  
**111.00**

**C.** Full Name (Last, First, Middle Initial)  
**Thomas C. Bennett Jr.**

Mailing Address 510 Riverside Pkwy

City Rome State GA Zip Code 30161-2902

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 06 / 2014

**Transaction ID : A2946C8696D1242C6ADE**

Amount of Each Receipt this Period  
**300.00**

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

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

**431.00**

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

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

FOR LINE NUMBER: PAGE 54 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Victor E. Van Damme**

Mailing Address 5113 Victoria Ave

City Las Vegas State NV Zip Code 89130

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 18 / 2014**

**Transaction ID : AE3166370F9D44F9585D**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Lawrence Mills**

Mailing Address 119 Adams Ct

City Kamiah State ID Zip Code 83536-5143

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **288.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

**Transaction ID : AC6E64B943ACA4E2B9EB**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 4434 E Camelback #137

City Phoenix State AZ Zip Code 85018-2835

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 24 / 2014**

**Transaction ID : AAFAF7C8F22984B22A33**

Amount of Each Receipt this Period  
**250.00**

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 55 OF 108

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Grant Carlson**

Mailing Address 1301 Twelve Oaks Circle

City Atlanta State GA Zip Code 30327-1862

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

Name of Employer Emory University Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : A457533573F8C4FEA9C1**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Kirk Chartier**

Mailing Address 2879 Normandy Dr NW

City Atlanta State GA Zip Code 30305-2824

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

Name of Employer Enova International Occupation Executive Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : ACC3C4D44CC34479583F**

Amount of Each Receipt this Period  
 -2600.00

Redesignation from Memo  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Kirk Chartier**

Mailing Address 2879 Normandy Dr NW

City Atlanta State GA Zip Code 30305-2824

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

Name of Employer Enova International Occupation Executive Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 07 / 2014

**Transaction ID : A86A64640B8554B9EA10**

Amount of Each Receipt this Period  
 2600.00

Redesignation to Memo  
**[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 56 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Kirk Chartier**

Mailing Address 2879 Normandy Dr NW

City Atlanta State GA Zip Code 30305-2824

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

Name of Employer Enova International Occupation Executive Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 08 / 2013

**Transaction ID : A1A586C42716D49C4975**

Amount of Each Receipt this Period  
 2600.00

As Previously Reported

**[MEMO ITEM]**

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

Mailing Address 269 Saint Patrick Dr SW

City Mableton State GA Zip Code 30126-1626

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

Name of Employer Interactive College of Technology Occupation College Administration

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 01 / 2014

**Transaction ID : A8AD95BF5EE134651A51**

Amount of Each Receipt this Period  
 -1000.00

Redesignation from Memo

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**James C Harris**

Mailing Address 269 Saint Patrick Dr SW

City Mableton State GA Zip Code 30126-1626

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

Name of Employer Interactive College of Technology Occupation College Administration

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 01 / 2014

**Transaction ID : A256AE1162B17482D977**

Amount of Each Receipt this Period  
 1000.00

Redesignation to Memo

**[MEMO ITEM]**

**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 57 OF 108
	<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)  
**Barr Congress Inc.**

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

Mailing Address 269 Saint Patrick Dr SW

City Mableton State GA Zip Code 30126-1626

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

Name of Employer Interactive College of Technology Occupation College Administration

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : A040A30FD447C40CD828**

Amount of Each Receipt this Period  
 1000.00

As Previously Reported

**[MEMO ITEM]**

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

Mailing Address 201 Fowler Rd SW

City Smyrna State GA Zip Code 30082-4521

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

Name of Employer Commercial Disposal Occupation Waste Hauling

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3030.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 10 / 2014

**Transaction ID : A80FB56809CBA4CE6842**

Amount of Each Receipt this Period  
 -430.00

Redesignation from Memo

**[MEMO ITEM]**

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

Mailing Address 201 Fowler Rd SW

City Smyrna State GA Zip Code 30082-4521

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

Name of Employer Commercial Disposal Occupation Waste Hauling

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3030.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 10 / 2014

**Transaction ID : A94FC8C03910D417D999**

Amount of Each Receipt this Period  
 430.00

Redesignation to Memo

**[MEMO ITEM]**

**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 58 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

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

Mailing Address 201 Fowler Rd SW

City State Zip Code  
Smyrna GA 30082-4521

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

Name of Employer Occupation  
Commercial Disposal Waste Hauling

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
0.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 11 / 2013

**Transaction ID : ADECD5502FFCF4C32900**

Amount of Each Receipt this Period  
2000.00

As Previously Reported

**[MEMO ITEM]**

**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

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

0.00

79188.00

**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 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**GEORGIA GROUP FEDERAL PAC INC**

Mailing Address 30 IVAN ALLEN JR BLVD NW STE 700

City Atlanta State GA Zip Code 30308-3036

FEC ID number of contributing federal political committee. **C** C00556282

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 10 / 2014

**Transaction ID : AFD9DC9EBAAEC4662BD8**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION**

Mailing Address 601 PENNSYLVANIA AVENUE, NW  
SOUTH BUILDING, SUITE 600

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : A5F57A77CBCECC40128ED**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**JIM GILMORE FOR SENATE**

Mailing Address 25 E MAIN ST

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00441261

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : A2E3C7A11DDB242A9B81**

Amount of Each Receipt this Period  
 1000.00

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

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

5500.00

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 108
	<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)  
**Barr Congress Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Bob Barr**

Mailing Address PO Box 675217

City Marietta State GA Zip Code 30006-0011

FEC ID number of contributing federal political committee. **C** H4GA11053

Name of Employer Self Employed Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2014

**Transaction ID : AB0F8031336D64078878**

Amount of Each Receipt this Period  
 400.00

In-kind: Event Catering

**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

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

400.00

400.00



**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 62 OF 108	
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Susan Bryg</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 512 Fairway Drive		Amount of Each Disbursement this Period 675.00 <b>Transaction ID : B8862BA4EB3654714889</b>
City Woodstock	State GA	
Zip Code 30189-6196	Purpose of Disbursement In-kind:Photography	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Pano Karatassos</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 265 Pharr Rd NE		Amount of Each Disbursement this Period 1350.00 <b>Transaction ID : B637A887E94DB4DBFBD1</b>
City Atlanta	State GA	
Zip Code 30305-2225	Purpose of Disbursement In-kind:Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Frank A. Smith Jr.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 2952 Mount Wilkinson Parkway #414		Amount of Each Disbursement this Period 335.00 <b>Transaction ID : BC2EB4C690B144C80808</b>
City Atlanta	State GA	
Zip Code 30339-3632	Purpose of Disbursement In-kind:Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2360.00
<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 63 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Bob Barr</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address PO Box 675217		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : BB0F8031336D64078878</b>
City Marietta	State GA	
Zip Code 30006-0011	Purpose of Disbursement In-kind:Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 2.88 <b>Transaction ID : BC26B5FCF14924E9E8CE</b>
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Paperless Transaction Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 400 E Royal Ln, Suite 201		Amount of Each Disbursement this Period 19.01 <b>Transaction ID : B53C4CE9B892E45D28C2</b>
City Irving	State TX	
Zip Code 75039-3512	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	421.89
<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 64 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Jennifer Chambrin</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014		
Mailing Address 1432 Lafayette Lane			Amount of Each Disbursement this Period 1390.30		
City Marietta	State GA	Zip Code 30068-2124	Transaction ID : <b>B63ADCB2474D3453589E</b>		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Derek Barr</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014		
Mailing Address 2825 Windy Hill Rd SE Apt 7205			Amount of Each Disbursement this Period 1203.10		
City Marietta	State GA	Zip Code 30067-6120	Transaction ID : <b>BC754EFB659DF484C88D</b>		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Quality Data</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014		
Mailing Address 150 2nd Ave N			Amount of Each Disbursement this Period 1331.46		
City Saint Petersburg	State FL	Zip Code 33701-3327	Transaction ID : <b>BDD407000181F4EC0A50</b>		
Purpose of Disbursement Payroll Taxes		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3924.86
<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 65 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial)

**A. Quality Data**

Mailing Address 150 2nd Ave N

City Saint Petersburg State FL Zip Code 33701-3327

Purpose of Disbursement Payroll Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 03 / 2014

Amount of Each Disbursement this Period: 75.00

Transaction ID : B7CA9221CD79A4B6A8D0

Full Name (Last, First, Middle Initial)

**B. Campaign Solutions**

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314-3109

Purpose of Disbursement Marketing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 05 / 2014

Amount of Each Disbursement this Period: 2.50

Transaction ID : BA1FCE1C1492A42E08E4

Full Name (Last, First, Middle Initial)

**c. MDI Imaging & Mail**

Mailing Address 21955 Cascades Pkwy

City Dulles State VA Zip Code 20166-9211

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 06 / 2014

Amount of Each Disbursement this Period: 11756.33

Transaction ID : BF4D6558B68FD480A939

**SUBTOTAL** of Disbursements This Page (optional)..... 11833.83

**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 66 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial)  
**A. Win Right Data**

Mailing Address 1252 Rambling Rill Cir

City Statham State GA Zip Code 30666-3602

Purpose of Disbursement Data Work

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 06 / 2014

Amount of Each Disbursement this Period: 581.10

Transaction ID : BA9A60B66B39E454789E

Full Name (Last, First, Middle Initial)  
**B. American Express**

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement CC Transaction Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 06 / 2014

Amount of Each Disbursement this Period: 109.52

Transaction ID : BC2163D3844E4473687F

Full Name (Last, First, Middle Initial)  
**C. Direct Mail Processors Inc**

Mailing Address 1150 Conrad Ct

City Hagerstown State MD Zip Code 21740-5905

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 06 / 2014

Amount of Each Disbursement this Period: 2516.44

Transaction ID : B2BBAC0CF19CF40A58A3

**SUBTOTAL** of Disbursements This Page (optional)..... 3207.06

**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 67 OF 108	
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial)  
**A. Visual Impact Design**

Mailing Address 1252 Rambling Rill Cir

City Statham State GA Zip Code 30666-3602

Purpose of Disbursement Direct Mail Graphic Design

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 06 / 2014

Amount of Each Disbursement this Period: 1050.00

Transaction ID : B117F13E4269C47F090A

Full Name (Last, First, Middle Initial)  
**B. Piryx, Inc.**

Mailing Address 144 2nd St  
FI 1

City San Francisco State CA Zip Code 94105-3718

Purpose of Disbursement CC Transaction Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 08 / 2014

Amount of Each Disbursement this Period: 57.50

Transaction ID : BCC096778BECE4073B42

Full Name (Last, First, Middle Initial)  
**c. American Express**

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement CC Transaction Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 08 / 2014

Amount of Each Disbursement this Period: 7.95

Transaction ID : B862CEA412FA44E9E92F

**SUBTOTAL** of Disbursements This Page (optional)..... 1115.45

**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 68 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial)

**A. Quality Data**

Mailing Address 150 2nd Ave N

City Saint Petersburg State FL Zip Code 33701-3327

Purpose of Disbursement Payroll Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 09 / 2014

Amount of Each Disbursement this Period: 189.00

Transaction ID : B0DED0D8C8D4A43FE835

Full Name (Last, First, Middle Initial)

**B. MDI Imaging & Mail**

Mailing Address 21955 Cascades Pkwy

City Dulles State VA Zip Code 20166-9211

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 10 / 2014

Amount of Each Disbursement this Period: 537.45

Transaction ID : B1C73547FF4334C83B28

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc.**

Mailing Address 144 2nd St  
FL 1

City San Francisco State CA Zip Code 94105-3718

Purpose of Disbursement CC Transaction Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 10 / 2014

Amount of Each Disbursement this Period: 0.81

Transaction ID : BC25D4DFFDEAA4E4CB2B

**SUBTOTAL** of Disbursements This Page (optional) ..... 727.26

**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 69 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. T-Mobile</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address PO Box 742596		Amount of Each Disbursement this Period 66.85
City Cincinnati	State OH	
Zip Code 45274-2596	Purpose of Disbursement Cell Phone	Transaction ID : <b>B6B4942F795964694BAB</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1500.00
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Software	Transaction ID : <b>B189839E2FE084359B11</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lipsett and Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 407 Lee's Trace		Amount of Each Disbursement this Period 300.00
City Marietta	State GA	
Zip Code 30064	Purpose of Disbursement Media Consulting	Transaction ID : <b>B58880420B4944647B4B</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1866.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 108	
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. The Georgian Club</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address PO Box 680788		Amount of Each Disbursement this Period 610.12 <b>Transaction ID : B62076D4E045644FB83D</b>
City Marietta	State GA	
Zip Code 30068-0014	Purpose of Disbursement Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. United Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address PO Box 393		Amount of Each Disbursement this Period 21.24 <b>Transaction ID : B4D013FA27C1E4B9DBB6</b>
City Charleston	State WV	
Zip Code 25322-0393	Purpose of Disbursement Bank Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Jennifer Chambrin</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 1432 Lafayette Lane		Amount of Each Disbursement this Period 1390.31 <b>Transaction ID : B6C01F8BB76014BE38DB</b>
City Marietta	State GA	
Zip Code 30068-2124	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2021.67
<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 71 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Derek Barr</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 2825 Windy Hill Rd SE Apt 7205		Amount of Each Disbursement this Period 1203.09 <b>Transaction ID : B9B7C24F368314814A01</b>
City Marietta State GA Zip Code 30067-6120	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Quality Data</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 150 2nd Ave N		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : BACAAFF7C38674E47B3B</b>
City Saint Petersburg State FL Zip Code 33701-3327	Purpose of Disbursement Payroll Expenses Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Quality Data</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 150 2nd Ave N		Amount of Each Disbursement this Period 1331.46 <b>Transaction ID : B2F751158350046E6B5E</b>
City Saint Petersburg State FL Zip Code 33701-3327	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2634.55
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 108			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Fulton County GOP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 5920 Roswell Road		Amount of Each Disbursement this Period 20.00 <b>Transaction ID : B2C39442975314B74895</b>
City Sandy Springs	State GA	
Zip Code 30328-4913	Purpose of Disbursement Event Tickets	Category/ Type
Candidate Name <b>Fulton County GOP</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. First Citizens</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address PO Box 29		Amount of Each Disbursement this Period 106.76 <b>Transaction ID : B13E2046902274D70930</b>
City Columbia	State SC	
Zip Code 29202-0029	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 144 2nd St FL 1		Amount of Each Disbursement this Period 1.44 <b>Transaction ID : BB9142F53B3414E75A46</b>
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	128.20
<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 73 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 33.96 <b>Transaction ID : B697BC061410E40EEAB6</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 32.23 <b>Transaction ID : BF0C8E7014FA74A42BE6</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 1668 Austin Dr		Amount of Each Disbursement this Period 244.86 <b>Transaction ID : B0D5C2A0AEFED435EB59</b>
City Decatur	State GA Zip Code 30032-4801	
Purpose of Disbursement Printing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	311.05
<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 74 OF 108			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 8.63 <b>Transaction ID : BD016E75188544A8DB8A</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 1.73 <b>Transaction ID : BAEE191B6B8C7485B90A</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 5.75 <b>Transaction ID : B35A45818B9294007B86</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16.11
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 3.04 <b>Transaction ID : BF268221245A747A5A53</b>
City Fort Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Quality Data</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 150 2nd Ave N		Amount of Each Disbursement this Period 1331.46 <b>Transaction ID : B981454F930F643DB942</b>
City Saint Petersburg	State FL	
Zip Code 33701-3327	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Liberty Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 3101 Towercreek Pkwy SE Ste 150		Amount of Each Disbursement this Period 1368.96 <b>Transaction ID : B9C933B55DE4E433FA1C</b>
City Atlanta	State GA	
Zip Code 30339-3256	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2703.46
<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 76 OF 108			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 1.44 <b>Transaction ID : BCC53E29E43484D078AE</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Derek Barr</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 2825 Windy Hill Rd SE Apt 7205		Amount of Each Disbursement this Period 1203.10 <b>Transaction ID : BE48112CE9BC14786BB5</b>
City Marietta	State GA Zip Code 30067-6120	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jennifer Chambrin</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 1432 Lafayette Lane		Amount of Each Disbursement this Period 1390.30 <b>Transaction ID : B6A5D752987EA4A1987A</b>
City Marietta	State GA Zip Code 30068-2124	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2594.84
<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 77 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014	
Mailing Address 144 2nd St FI 1			Amount of Each Disbursement this Period 2.88	
City San Francisco	State CA	Zip Code 94105-3718	Transaction ID : <b>BAF8F880CEBE148CCA8B</b>	
Purpose of Disbursement CC Transaction Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Paperless Transaction Corporation</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014	
Mailing Address 400 E Royal Ln, Suite 201			Amount of Each Disbursement this Period 8.75	
City Irving	State TX	Zip Code 75039-3512	Transaction ID : <b>B703F4FF6F8E9493B914</b>	
Purpose of Disbursement CC Transaction Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014	
Mailing Address 144 2nd St FI 1			Amount of Each Disbursement this Period 34.51	
City San Francisco	State CA	Zip Code 94105-3718	Transaction ID : <b>B57A92EBD99CF48C59B1</b>	
Purpose of Disbursement CC Transaction Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	46.14
<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 78 OF 108			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Costco</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 1550 Mall of Georgia Blvd		Amount of Each Disbursement this Period 31.42
City Buford	State GA Zip Code 30519-6551	
Purpose of Disbursement Event Supplies		Transaction ID : B620C9C5C84684119BC5
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 55.51
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees		Transaction ID : BE0FE46388554406EBAC
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Petty Cash</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 3300 Cumberland Blvd SE		Amount of Each Disbursement this Period 300.00
City Atlanta	State GA Zip Code 30339-8103	
Purpose of Disbursement Petty Cash		Transaction ID : B2C9198476B784B01818
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	386.93
<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 79 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Direct Mail Processors Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 1150 Conrad Ct		Amount of Each Disbursement this Period 315.20 <b>Transaction ID : B14CEB3D7A6B44E3F8A4</b>
City Hagerstown	State MD Zip Code 21740-5905	
Purpose of Disbursement Postage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Win Right Data</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 1252 Rambling Rill Cir		Amount of Each Disbursement this Period 225.00 <b>Transaction ID : B9C486A486671467E92C</b>
City Statham	State GA Zip Code 30666-3602	
Purpose of Disbursement Data Work	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 364 Green St NE		Amount of Each Disbursement this Period 6.95 <b>Transaction ID : B55F6ADF5A8104ACD84D</b>
City Gainesville	State GA Zip Code 30501-3310	
Purpose of Disbursement Postage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	547.15
<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 80 OF 108			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. MDI Imaging &amp; Mail</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 21955 Cascades Pkwy		Amount of Each Disbursement this Period 1012.24 <b>Transaction ID : B9E74D5C84761468B8EC</b>
City Dulles	State VA	
Zip Code 20166-9211	Purpose of Disbursement Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Patrick Mooney</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 8550 E. Touchton Rd. #1621		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : BF90AB35C076946BBB5E</b>
City Jacksonville	State FL	
Zip Code 32216-2220	Purpose of Disbursement Postage Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Visual Impact Design</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 1252 Rambling Rill Cir		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : BFA6A87F5426843B5AB0</b>
City Statham	State GA	
Zip Code 30666-3602	Purpose of Disbursement Direct Mail Graphic Design	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6362.24
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 32.08 <b>Transaction ID : B59FDD19860C64EA894F</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 3.40 <b>Transaction ID : BD264267E4C4541DBBBB</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 73.32 <b>Transaction ID : B409F47050CE145ADAB6</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	108.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014		
Mailing Address 144 2nd St FI 1			Amount of Each Disbursement this Period 41.44		
City San Francisco		State CA	Zip Code 94105-3718		Transaction ID : BCCB935C0F7144C988F3
Purpose of Disbursement CC Transaction Fees		Category/Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify)	<input type="checkbox"/> General		

Full Name (Last, First, Middle Initial) <b>B. United Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014		
Mailing Address PO Box 393			Amount of Each Disbursement this Period 15.75		
City Charleston		State WV	Zip Code 25322-0393		Transaction ID : B9C52F249B6E94E2E820
Purpose of Disbursement Bank Fees		Category/Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify)	<input type="checkbox"/> General		

Full Name (Last, First, Middle Initial) <b>c. Piryx, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014		
Mailing Address 144 2nd St FI 1			Amount of Each Disbursement this Period 4.90		
City San Francisco		State CA	Zip Code 94105-3718		Transaction ID : B9F0F8FB29D6442A58A5
Purpose of Disbursement CC Transaction Fees		Category/Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify)	<input type="checkbox"/> General		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	62.09
<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 83 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Georgia Federation of Republican Women</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 14 / 2014</b>
Mailing Address <b>757 Hampton Place</b>		Amount of Each Disbursement this Period <b>40.00</b> Transaction ID : <b>B54C00A2DB28E43BA9F2</b>
City <b>Marietta</b> State <b>GA</b> Zip Code <b>30064-3325</b>	Purpose of Disbursement <b>Event Tickets</b>	
Candidate Name <b>Georgia Federation of Republican Women</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Professional Data Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 19 / 2014</b>
Mailing Address <b>2470 Daniels Bridge Rd Ste 121</b>		Amount of Each Disbursement this Period <b>1519.32</b> Transaction ID : <b>BE63518C11F0B481195A</b>
City <b>Athens</b> State <b>GA</b> Zip Code <b>30606-6191</b>	Purpose of Disbursement <b>Compliance Consulting</b>	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ebony and Ivory Catfish, Chicken, BBQ</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 19 / 2014</b>
Mailing Address <b>5000 Green Forest Pkwy</b>		Amount of Each Disbursement this Period <b>1602.86</b> Transaction ID : <b>B37DC02062D7040F3AB9</b>
City <b>Smyrna</b> State <b>GA</b> Zip Code <b>30082-4105</b>	Purpose of Disbursement <b>Event Catering</b>	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3162.18</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. ThruTech Inc</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2014
Mailing Address 4360 Georgetown Sq Ste 817		Amount of Each Disbursement this Period 438.84 <b>Transaction ID : B510873E130DE43AEBFD</b>
City Atlanta	State GA Zip Code 30338-6220	
Purpose of Disbursement Web Hosting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Georgian Club</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2014
Mailing Address PO Box 680788		Amount of Each Disbursement this Period 134.00 <b>Transaction ID : B1797A19916F64F0E8E0</b>
City Marietta	State GA Zip Code 30068-0014	
Purpose of Disbursement Event Catering	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2014
Mailing Address 144 2nd St Fl 1		Amount of Each Disbursement this Period 28.75 <b>Transaction ID : BD5021CB59C344B9BB68</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	601.59
<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 85 OF 108			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. First Citizens</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address PO Box 29		Amount of Each Disbursement this Period 83.58 <b>Transaction ID : B2BAA31BEA5DF4A649A1</b>
City Columbia	State SC	
Zip Code 29202-0029	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Cobb Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address PO Box 671868		Amount of Each Disbursement this Period 625.00 <b>Transaction ID : B594C5C3D9A3B4C88B9A</b>
City Marietta	State GA	
Zip Code 30006-0032	Purpose of Disbursement Membership Dues	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Cherokee County GOP</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address PO Box 1267		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : B804E1F1E1A7D4D59AA4</b>
City Woodstock	State GA	
Zip Code 30188-1267	Purpose of Disbursement Membership Dues	Category/ Type
Candidate Name <b>Cherokee County GOP</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	733.58
<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 86 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Fulton County GOP</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 5920 Roswell Road		Amount of Each Disbursement this Period 40.00 <b>Transaction ID : B2F7283E75AA34497B0D</b>
City Sandy Springs	State GA	
Zip Code 30328-4913	Purpose of Disbursement Membership Dues	Category/ Type
Candidate Name <b>Fulton County GOP</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Campaign Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 117 N Saint Asaph St		Amount of Each Disbursement this Period 2.50 <b>Transaction ID : BFC5858574DF84CF18A2</b>
City Alexandria	State VA	
Zip Code 22314-3109	Purpose of Disbursement Marketing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Quality Data</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 150 2nd Ave N		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : B23C5011B42AE499D84D</b>
City Saint Petersburg	State FL	
Zip Code 33701-3327	Purpose of Disbursement Payroll Expenses	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	117.50
<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 87 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial)

**A. Quality Data**

Mailing Address 150 2nd Ave N

City Saint Petersburg State FL Zip Code 33701-3327

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 28 / 2014

Amount of Each Disbursement this Period: 2638.54

Transaction ID : B540778D445D746148C6

Full Name (Last, First, Middle Initial)

**B. Direct Mail Processors Inc**

Mailing Address 1150 Conrad Ct

City Hagerstown State MD Zip Code 21740-5905

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 28 / 2014

Amount of Each Disbursement this Period: 513.95

Transaction ID : B39CD8762584541DE9CF

Full Name (Last, First, Middle Initial)

**C. Jennifer Chambrin**

Mailing Address 1432 Lafayette Lane

City Marietta State GA Zip Code 30068-2124

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 28 / 2014

Amount of Each Disbursement this Period: 2780.60

Transaction ID : BF0072F2270464163A28

**SUBTOTAL** of Disbursements This Page (optional)..... 5933.09

**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 88 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Derek Barr</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 2825 Windy Hill Rd SE Apt 7205		Amount of Each Disbursement this Period 2406.20 <b>Transaction ID : B29FB02CAA4FB481EB90</b>
City Marietta	State GA	
Zip Code 30067-6120	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 6.39 <b>Transaction ID : BAEEBADB070214549B71</b>
City Fort Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Georgia Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 3110 Maple Drive Ste. 150		Amount of Each Disbursement this Period 5220.00 <b>Transaction ID : B440F09B8AA4B43E2816</b>
City Atlanta	State GA	
Zip Code 30305-2650	Purpose of Disbursement Qualifying Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7632.59
<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 89 OF 108			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Paperless Transaction Corporation</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014	
Mailing Address 400 E Royal Ln, Suite 201			Amount of Each Disbursement this Period 19.90	
City Irving	State TX	Zip Code 75039-3512	Transaction ID : BAFFFFF8F59C943FE964	
Purpose of Disbursement CC Transaction Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014	
Mailing Address 144 2nd St FI 1			Amount of Each Disbursement this Period 22.65	
City San Francisco	State CA	Zip Code 94105-3718	Transaction ID : BD5799D2BE15B4765A9B	
Purpose of Disbursement CC Transaction Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014	
Mailing Address 144 2nd St FI 1			Amount of Each Disbursement this Period 15.82	
City San Francisco	State CA	Zip Code 94105-3718	Transaction ID : B82083C6691C448B58E9	
Purpose of Disbursement CC Transaction Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	58.37
<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 90 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 19.44 <b>Transaction ID : BEA41848461204C62BC9</b>
City Fort Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Cherokee County Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address PO Box 4998		Amount of Each Disbursement this Period 20.00 <b>Transaction ID : BFE5FA86183F6409B987</b>
City Canton	State GA	
Zip Code 30114-0030	Purpose of Disbursement Event Tickets	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Costco</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 1550 Mall of Georgia Blvd		Amount of Each Disbursement this Period 633.75 <b>Transaction ID : B306CC29DFA8B4650948</b>
City Buford	State GA	
Zip Code 30519-6551	Purpose of Disbursement Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	673.19
<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 91 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 17.26 <b>Transaction ID : B630B26BBE6B74D46988</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 15.19 <b>Transaction ID : B45DC2B93ADEF4C35908</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Digital Xpress</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 2211 Beaver Ruin Rd Ste 170		Amount of Each Disbursement this Period 1261.98 <b>Transaction ID : B2F106EAFD910485E88E</b>
City Norcross	State GA Zip Code 30071-3328	
Purpose of Disbursement Printing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1294.43
<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 92 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 5.75 <b>Transaction ID : B68B0D4A172004248A6E</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 4.61 <b>Transaction ID : BB1D04D38E0CB4BA3818</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 43.13 <b>Transaction ID : B75051A978F6F4AE28CA</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	53.49
<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 93 OF 108			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Capitol Strategy Group</b>		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		17		2014
M M	/	D D	/	Y Y Y Y								
03		17		2014								
Mailing Address 2700 Cumberland Pkwy SE Ste 150		Amount of Each Disbursement this Period <table border="1"> <tr> <td>6000.00</td> </tr> </table> <b>Transaction ID : B3A2536A0635846D7833</b>	6000.00									
6000.00												
City Atlanta State GA Zip Code 30339-3321	Purpose of Disbursement Fundraising Consulting											
Candidate Name	Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>18</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		18		2014
M M	/	D D	/	Y Y Y Y								
03		18		2014								
Mailing Address 144 2nd St Fl 1		Amount of Each Disbursement this Period <table border="1"> <tr> <td>150.76</td> </tr> </table> <b>Transaction ID : BE9C74BA3FE6246F8B43</b>	150.76									
150.76												
City San Francisco State CA Zip Code 94105-3718	Purpose of Disbursement CC Transaction Fees											
Candidate Name	Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>20</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		20		2014
M M	/	D D	/	Y Y Y Y								
03		20		2014								
Mailing Address 144 2nd St Fl 1		Amount of Each Disbursement this Period <table border="1"> <tr> <td>15.54</td> </tr> </table> <b>Transaction ID : B31D1DD52F2224EBE860</b>	15.54									
15.54												
City San Francisco State CA Zip Code 94105-3718	Purpose of Disbursement CC Transaction Fees											
Candidate Name	Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6166.30
<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 94 OF 108			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. First Citizens</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address PO Box 29		Amount of Each Disbursement this Period 85.73
City Columbia	State SC	
Zip Code 29202-0029	Purpose of Disbursement CC Transaction Fees	Transaction ID : <b>B53D603BB411A459E952</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 32.21
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement CC Transaction Fees	Transaction ID : <b>B16343BEC264D42B5867</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Patrick Mooney</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 8550 E. Touchton Rd. #1621		Amount of Each Disbursement this Period 7206.31
City Jacksonville	State FL	
Zip Code 32216-2220	Purpose of Disbursement Postage Reimbursement	Transaction ID : <b>B7E6ABF509C4B4C3FA95</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7324.25
<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 95 OF 108	
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Capitol Strategy Group</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 2700 Cumberland Pkwy SE Ste 150		Amount of Each Disbursement this Period 6000.00 <b>Transaction ID : B920E8553E14F43A897E</b>
City Atlanta	State GA Zip Code 30339-3321	
Purpose of Disbursement Fundraising Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 2963 Cobb Pkwy SE		Amount of Each Disbursement this Period 21.18 <b>Transaction ID : B624D6ED9DF184C4186A</b>
City Atlanta	State GA Zip Code 30339-8118	
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 144 2nd St Fl 1		Amount of Each Disbursement this Period 57.50 <b>Transaction ID : B0DBB3D9878BC4FBD995</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6078.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 108			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 28.75 <b>Transaction ID : BEBDF47089E74F99966</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 10.07 <b>Transaction ID : BA4B76F95B8D2449B939</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Liberty Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 3101 Towercreek Pkwy SE Ste 150		Amount of Each Disbursement this Period 1876.80 <b>Transaction ID : B51F349E885F349F1B40</b>
City Atlanta	State GA Zip Code 30339-3256	
Purpose of Disbursement Office Rent	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1915.62
<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 97 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Cobb County Republican Women's Club</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address PO Box 4476		Amount of Each Disbursement this Period 99.00 Transaction ID : B7E67C453FD8E46E8ACC
City Marietta	State GA	
Zip Code 30061-4476	Purpose of Disbursement Event Tickets	Category/ Type
Candidate Name Cobb County Republican Women's Club	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 1.44 Transaction ID : B5C3757B2B42C41CFA42
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 69.03 Transaction ID : BBD00245D76B042E4B97
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement CC Transaction Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	99.07
<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 98 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 86.25 <b>Transaction ID : B8BDDC4790A2E4444AE3</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1668 Austin Dr		Amount of Each Disbursement this Period 42.85 <b>Transaction ID : B028066028064486C8B6</b>
City Decatur	State GA Zip Code 30032-4801	
Purpose of Disbursement Shipping		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 93.46 <b>Transaction ID : BF1A8835FC33E4AD6948</b>
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement CC Transaction Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	222.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. First Citizens</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO Box 29		Amount of Each Disbursement this Period 10.50 <b>Transaction ID : B9444D52FA429415FA45</b>
City Columbia	State SC	
Zip Code 29202-0029	Purpose of Disbursement Bank Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Professional Data Services</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 2470 Daniels Bridge Rd Ste 121		Amount of Each Disbursement this Period 1527.18 <b>Transaction ID : B3A39D32CA918443183B</b>
City Athens	State GA	
Zip Code 30606-6191	Purpose of Disbursement Compliance Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Campaign Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 117 N Saint Asaph St		Amount of Each Disbursement this Period 2.50 <b>Transaction ID : BF5639803844D4D0D906</b>
City Alexandria	State VA	
Zip Code 22314-3109	Purpose of Disbursement Marketing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1540.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 181.98 <b>Transaction ID : B322313FB7EF74176982</b>
City Fort Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement See Below	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Go Daddy</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 14455 N Hayden Rd #219		Amount of Each Disbursement this Period 181.98 <b>Transaction ID : B2949021FDC664878ABC</b> <b>[MEMO ITEM]</b>
City Scottsdale	State AZ	
Zip Code 85260-6993	Purpose of Disbursement Domain Renewal	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. First Principles LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 11126 Celano Drive		Amount of Each Disbursement this Period 883.50 <b>Transaction ID : BEA93AF4CF60E4A8EAF5</b>
City Richmond	State TX	
Zip Code 77406-4577	Purpose of Disbursement See Below	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1065.48
<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 101 OF 108	
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 233 S. Wacker Drive		Amount of Each Disbursement this Period 883.50
City Chicago	State IL Zip Code 60606-6423	
Purpose of Disbursement Airfare	Category/Type	<b>Transaction ID : B988EFEE915F34F55B60</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Americans for Tax Reform</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 722 12th St. NW 4th Floor		Amount of Each Disbursement this Period 597.00
City Washington	State DC Zip Code 20005-3966	
Purpose of Disbursement See Below	Category/Type	<b>Transaction ID : B8E808A0C6C1B4D7CA36</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Delta</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 1030 Delta Blvd		Amount of Each Disbursement this Period 597.00
City Atlanta	State GA Zip Code 30354-1989	
Purpose of Disbursement Airfare	Category/Type	<b>Transaction ID : BD58748F557E24678A0C</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	597.00
<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 102 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 1231.96 <b>Transaction ID : B03DA80BAEDF24FE280E</b>
City Fort Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement See Below	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cobb County Republican Women's Club</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address PO Box 4476		Amount of Each Disbursement this Period 48.00 <b>Transaction ID : BF00B335B192F448EB7D</b>
City Marietta	State GA	
Zip Code 30061-4476	Purpose of Disbursement Event Tickets	Category/ Type
Candidate Name <b>Cobb County Republican Women's Club</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial) <b>c. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 2963 Cobb Pkwy SE		Amount of Each Disbursement this Period 138.97 <b>Transaction ID : B83733420C6F546389ED</b>
City Atlanta	State GA	
Zip Code 30339-8118	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1231.96
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Cobb Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address PO Box 671868		Amount of Each Disbursement this Period 766.37
City Marietta	State GA	
Zip Code 30006-0032	Purpose of Disbursement Event Tickets	Transaction ID : <b>BC1A12D528BF64687999</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 4000 E. Sky Harbor Blvd.		Amount of Each Disbursement this Period 773.99
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement Airfare	Transaction ID : <b>BF4E2E72525874FA9843</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 766.37
City Fort Lauderdale	State FL	
Zip Code 33336-0001	Purpose of Disbursement See Below	Transaction ID : <b>B1C0E3C67717F4C92AD7</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	766.37
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 108	
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. Sheraton Hotels</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2014
Mailing Address 2844 Cobb Pkwy SE		Amount of Each Disbursement this Period 191.21 <b>Transaction ID : B2728DC0C8CB04609BC3</b>
City Atlanta	State GA Zip Code 30339-3113	
Purpose of Disbursement Lodging	Category/Type	<b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Go Daddy</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2014
Mailing Address 14455 N Hayden Rd #219		Amount of Each Disbursement this Period 13.17 <b>Transaction ID : B6B582BC8803E4FA3B51</b>
City Scottsdale	State AZ Zip Code 85260-6993	
Purpose of Disbursement Domain Renewal	Category/Type	<b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Thrifty Car Rental</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2014
Mailing Address 2300 Rental Car Center Parkway		Amount of Each Disbursement this Period 233.33 <b>Transaction ID : B660F9A2AA4ED4A7FB4F</b>
City Atlanta	State GA Zip Code 30320	
Purpose of Disbursement Car Rental	Category/Type	<b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
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 105 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial)  
**A. Hilton Hotels**

Mailing Address 390 E Washington St

City Athens State GA Zip Code 30601-2751

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 27 / 2014

Amount of Each Disbursement this Period: 234.64

Transaction ID : BB12F90C3C57F4EB9999

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. USAA Credit Card**

Mailing Address 10750 McDermott Fwy

City San Antonio State TX Zip Code 78288-0002

Purpose of Disbursement See Below

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 10 / 2014

Amount of Each Disbursement this Period: 100.00

Transaction ID : B734A1C5694DF420683D

Full Name (Last, First, Middle Initial)  
**c. Constant Contact**

Mailing Address 1601 Trapelo Rd

City Waltham State MA Zip Code 02451-7333

Purpose of Disbursement Email Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 10 / 2014

Amount of Each Disbursement this Period: 100.00

Transaction ID : BD0930E822C574833B00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... 100.00

**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 106 OF 108	
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. USAA Credit Card</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 10750 McDermott Fwy		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : BCFB0FB42AB2F45439A1</b>
City San Antonio	State TX Zip Code 78288-0002	
Purpose of Disbursement See Below	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Constant Contact</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 1601 Trapelo Rd		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : BC2960EBF5FDB44B5A32</b> <b>[MEMO ITEM]</b>
City Waltham	State MA Zip Code 02451-7333	
Purpose of Disbursement Email Services	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. First Principles LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 11126 Celano Drive		Amount of Each Disbursement this Period 74.00 <b>Transaction ID : B98F0C789BFFD48AE928</b>
City Richmond	State TX Zip Code 77406-4577	
Purpose of Disbursement See Below	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	174.00
<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 107 OF 108			
	<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)  
**Barr Congress Inc.**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 233 S. Wacker Drive		Amount of Each Disbursement this Period 74.00
City Chicago	State IL Zip Code 60606-6423	
Purpose of Disbursement Airfare	Category/Type	<b>Transaction ID : B1DD77737642F4797BB5</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. USAA Credit Card</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 10750 McDermott Fwy		Amount of Each Disbursement this Period 100.00
City San Antonio	State TX Zip Code 78288-0002	
Purpose of Disbursement See Below	Category/Type	<b>Transaction ID : B6D282348324D416A909</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Constant Contact</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 1601 Trapelo Rd		Amount of Each Disbursement this Period 100.00
City Waltham	State MA Zip Code 02451-7333	
Purpose of Disbursement Email Services	Category/Type	<b>Transaction ID : B3E0EF2EBD5B942C38B8</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	91022.31