

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
GARRET GRAVES FOR CONGRESS

ADDRESS (number and street) PO BOX 64845
Check if different than previously reported. (ACC) BATON ROUGE LA 70896

2. FEC IDENTIFICATION NUMBER C C00558486
3. IS THIS REPORT NEW (N) OR AMENDED (A) X
CITY STATE ZIP CODE STATE DISTRICT LA 06

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[X] April 15 Quarterly Report (Q1)
[ ] July 15 Quarterly Report (Q2)
[ ] October 15 Quarterly Report (Q3)
[ ] January 31 Year-End Report (YE)
[ ] Termination Report (TER)
(b) 12-Day PRE-Election Report for the:
[ ] Primary (12P) [ ] General (12G) [ ] Runoff (12R)
[ ] Convention (12C) [ ] Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day POST-Election Report for the:
[ ] General (30G) [ ] Runoff (30R) [ ] Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2014 through M M / D D / Y Y Y Y 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 CHRISTEL SLAUGHTER

Signature of Treasurer CHRISTEL SLAUGHTER [Electronically Filed] Date M M / D D / Y Y Y Y 07 / 07 / 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  
**GARRET GRAVES FOR CONGRESS**

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

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 320827.46               | 320827.46                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                           | 320827.46               | 320827.46                          |
| 7. Net Operating Expenditures   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 8508.74                 | 8508.74                            |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                      | 8508.74                 | 8508.74                            |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....   | 312318.72               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 0.00                    |                                    |

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**GARRET GRAVES FOR CONGRESS**

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

| <b>I. RECEIPTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>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).....   | 296112.46                             | 296112.46                                  |
| (ii) Unitemized.....   | 2615.00                               | 2615.00                                    |
| (iii) TOTAL of contributions from individuals ▶  | 298727.46                             | 298727.46                                  |
| (b) Political Party Committees.....  | 0.00                                  | 0.00                                       |
| (c) Other Political Committees (such as PACs).....   | 22100.00                              | 22100.00                                   |
| (d) The Candidate.....   | 0.00                                  | 0.00                                       |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..                     | 320827.46                             | 320827.46                                  |
| <b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>  | 0.00                                  | 0.00                                       |
| <b>13. LOANS:</b>  |                                       |  |
| (a) Made or Guaranteed by the Candidate.....   | 0.00                                  | 0.00                                       |
| (b) All Other Loans.....   | 0.00                                  | 0.00                                       |
| (c) TOTAL LOANS (add Lines 13(a) and (b)).....   | 0.00                                  | 0.00                                       |
| <b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>                                | 0.00                                  | 0.00                                       |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>  | 0.00                                  | 0.00                                       |
| <b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b> | 320827.46                             | 320827.46                                  |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 8508.74                       | 8508.74                            |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 8508.74                       | 8508.74                            |

**III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 0.00      |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 320827.46 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 320827.46 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 8508.74   |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 312318.72 |

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

|   |   |              |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 5 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |              |

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

**A.** Full Name (Last, First, Middle Initial)  
**HAMID ALIZADEH**

Mailing Address **14 EAST WOODLAWN DRIVE**

City **DESTREHAN** State **LA** Zip Code **70047**

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

Name of Employer **CB&I** Occupation **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 / 25 / 2014**

**Transaction ID : SA11AI.5057**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**ASSOCIATED BRANCH PILOTS**

Mailing Address **3813 N. CASUEWAY BLVD #100**

City **MATAIRIE** State **LA** Zip Code **70002**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2300.00**

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

**Transaction ID : SA11AI.5073**

Amount of Each Receipt this Period  
**2300.00**

LLC INFORMATION REQUESTED

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

Mailing Address **142 W. 121ST STREET**

City **NEW YORK** State **NY** Zip Code **10027**

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

Name of Employer **VERIZON** Occupation **ATTORNEY**

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 / 26 / 2014**

**Transaction ID : SA11AI.4950**

Amount of Each Receipt this Period  
**1000.00**

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

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

**3800.00**

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 6 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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

**A.** Full Name (Last, First, Middle Initial)  
**JAMES J BAILEY III**

Mailing Address 7255 BOCAGE BLVD

City State Zip Code  
BATON ROUGE LA 70809

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

Name of Employer Occupation  
BAILEY INVESTMENTS 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 Y Y  
 03 / 31 / 2014

**Transaction ID : SA11AI.5006**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**DENA R BALART**

Mailing Address 17920 INVERNESS AVE

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
BEST EFFORTS INFORMATION REQUESTED BEST EFFORTS INFORMATION REQUESTED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.5015**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 200 NORTH OAK

City State Zip Code  
OAK RIDGE LA 71264

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

Name of Employer Occupation  
STATE OF LOUISIANA DEPARTMENT SECRETARY

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 / 31 / 2014

**Transaction ID : SA11AI.5009**

Amount of Each Receipt this Period  
1000.00

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

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

4600.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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

**A.** Full Name (Last, First, Middle Initial)  
**RAYCHEL BARTEK**

Mailing Address 11801 TUXWORTH TRAIL

City State Zip Code  
BUMPASS VA 23024

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11AI.5099**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**JENIFER MEGAN BEL**

Mailing Address 228 15TH STREET NE

City State Zip Code  
WASHINGTON DC 20002

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

Name of Employer Occupation  
NATIONAL OCEAN INDUSTRIES, LLP PRESIDENT

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  
 03 / 31 / 2014

**Transaction ID : SA11AI.5107**

Amount of Each Receipt this Period  
750.00

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

Mailing Address 19420 N. MURIFIELD CIRCLE

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
BERNHARD CAPITAL PARTNERS 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 Y Y  
 03 / 31 / 2014

**Transaction ID : SA11AI.4920**

Amount of Each Receipt this Period  
2600.00

**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 8 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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

**A.** Full Name (Last, First, Middle Initial)  
**GEORGE P BEVAN**

Mailing Address 19420 N. MURIFIELD CIRCLE

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
BERNHARD CAPITAL PARTNERS PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

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

**Transaction ID : SA11AI.4921**

Amount of Each Receipt this Period  
2400.00

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

Mailing Address 650 POYDRAS STREET, #2345

City State Zip Code  
NEW ORLEANS LA 70130

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

Name of Employer Occupation  
PONTCHARTRAIN PARTNERS, LLC PARTNER

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 / 27 / 2014

**Transaction ID : SA11AI.4944**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 4 GLEN OAKS DRIVE

City State Zip Code  
HOUMA LA 70360

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

Name of Employer Occupation  
BOLLINGER SHIPYARDS, INC. EXECUTIVE

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 / 31 / 2014

**Transaction ID : SA11AI.5108**

Amount of Each Receipt this Period  
1000.00

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

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

4400.00



**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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

**A.** Full Name (Last, First, Middle Initial)  
**DONALD BOLLINGER**

Mailing Address **PO BOX 250**

City **LOCKPORT** State **LA** Zip Code **70374**

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

Name of Employer **BOLLINGER SHIPYARDS, INC.** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2300.00**

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

**Transaction ID : SA11AI.5113**

Amount of Each Receipt this Period  
**2300.00**

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

Mailing Address **NO 20 CHATEAU DU JARDIN**

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

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

Name of Employer **BAROWKA & BONURA ENGINEERS & CONS** Occupation **ENGINEER**

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 / 25 / 2014**

**Transaction ID : SA11AI.4937**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **535 BETZ PLACE**

City **METAIRIE** State **LA** Zip Code **70005**

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

Name of Employer **ALL SOUTH CONSULTING ENGINEERS LLC** Occupation **MANAGING PARTNER**

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 / 31 / 2014**

**Transaction ID : SA11AI.5081**

Amount of Each Receipt this Period  
**1000.00**

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

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

**3800.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 10 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**CLARK G BOYCE JR.**

Mailing Address 645 HIGHLANDIA DRIVE

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
LOUISIANA MACHINERY CO MANAGER

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 / 25 / 2014

**Transaction ID : SA11AI.5024**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**CLARK G BOYCE JR.**

Mailing Address 645 HIGHLANDIA DRIVE

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
LOUISIANA MACHINERY CO MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
5200.00

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

**Transaction ID : SA11AI.5068**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**CLARK G BOYCE JR.**

Mailing Address 645 HIGHLANDIA DRIVE

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
LOUISIANA MACHINERY CO 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  
03 / 25 / 2014

**Transaction ID : SA11AI.5069**

Amount of Each Receipt this Period  
2600.00

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

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

7800.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. RODNEY C BRAXTON**

Mailing Address 15708 WOODLAND TRAIL AVE.

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>BATON ROUGE | State<br>LA | Zip Code<br>70817 |
|---------------------|-------------|-------------------|

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

|   |                                    |
|---|------------------------------------|
| Name of Employer<br>SOUTHERN STRATEGIES GROUP | Occupation<br>GOVERNMENT RELATIONS |
|---|------------------------------------|

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 : SA11AI.4900**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**JAMES D BREWER**

Mailing Address 17421 W. MURIFIELD DRIVE

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>BATON ROUGE | State<br>LA | Zip Code<br>70810 |
|---------------------|-------------|-------------------|

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

|                                      |  |
|--------------------------------------|--|
| Name of Employer<br>BREWER GROUP LLC | Occupation<br>PUBLIC RELATIONS 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 Y Y  
 03 / 31 / 2014

**Transaction ID : SA11AI.5115**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 5625 JAMES GUNNELL LANE

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>ALEZANDRIA | State<br>VA | Zip Code<br>22310 |
|--------------------|-------------|-------------------|

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

|  |                        |
|--|------------------------|
| Name of Employer<br>ADAMS & REESE, LLP | Occupation<br>ATTORNEY |
|--|------------------------|

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2300.00

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

**Transaction ID : SA11AI.5020**

Amount of Each Receipt this Period  
2300.00

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

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

3300.00

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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 12 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. LUCY ANN BURNETT</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |  |
| Mailing Address 1000 BOURBON STREET #312  |                                   | <b>Transaction ID : SA11AI.4917</b>                      |  |
| City<br>NEW ORLEANS   | State<br>LA                       | Zip Code<br>70116  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2600.00            |  |
| Name of Employer<br>HOMEMAKER   | Occupation<br>HOMEMAKER           |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2600.00 |  |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. LUCY ANN BURNETT</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |  |
| Mailing Address 1000 BOURBON STREET #312  |                                   | <b>Transaction ID : SA11AI.4918</b>                      |  |
| City<br>NEW ORLEANS   | State<br>LA                       | Zip Code<br>70116  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2600.00            |  |
| Name of Employer<br>HOMEMAKER   | Occupation<br>HOMEMAKER           |  |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>5200.00 |  |  |

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. PETER BUTLER JR.</b>   |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 25 / 2014 |  |
| Mailing Address 909 POYDRAS ST.<br>STE 1500   |                                  | <b>Transaction ID : SA11AI.5070</b>                      |  |
| City<br>NEW ORLEANS   | State<br>LA                      | Zip Code<br>70112  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>500.00             |  |
| Name of Employer<br>BREAZEAL, SACHISE, AND WILSON   | Occupation<br>ATTORNEY           |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 5700.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 5700.00 |

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**HUGH F CAFFERY**

Mailing Address 1290 VALENTINE DRIVE

City State Zip Code  
LOCKPORT LA 70374

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

Name of Employer Occupation  
VALENTINE SUGARS EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.4898**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**HARRY L CAHILL**

Mailing Address 3740 LAKE MICHAEL CT.

City State Zip Code  
GRETNA LA 70056

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

Name of Employer Occupation  
SELF-EMPLOYED INSURANCE AGENT

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 / 25 / 2014

**Transaction ID : SA11AI.5047**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 908 CROTON DRIVE

City State Zip Code  
ALEXANDRIA VA 22308

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

Name of Employer Occupation  
LIVINGSTON GROUP GOVERNMENT RELATIONS

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 : SA11AI.5038**

Amount of Each Receipt this Period  
2600.00

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

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

6100.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**MARTIN CANCIENNE**

Mailing Address **PO BOX 36**  
**7075 HWY 1 SOUTH**

City **BELLE ROSE** State **LA** Zip Code **70341**

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

Name of Employer **DMC CONSULTORS** Occupation **CONSULTANT**

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 : SA11AI.4996**

Amount of Each Receipt this Period  
**2600.00**

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

Mailing Address **225 I STREET, NE**

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

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

Name of Employer **CHARTER COMMUNICATIONS** Occupation **VP LEGISLATIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.14**

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

**Transaction ID : SA11AI.4953**

Amount of Each Receipt this Period  
**1000.14**

**C.** Full Name (Last, First, Middle Initial)  
**MR. J PATRICK CAVE**

Mailing Address **5009 UPTON STREET NW**

City **WASHINGTON** State **DC** Zip Code **20016**

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

Name of Employer **CYPRESS GROUP** Occupation **MANAGING PARTNER**

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 / 31 / 2014**

**Transaction ID : SA11AI.4902**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4600.14**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 15 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. R BLAKE CHATELAIN**

Mailing Address 1704 EMBERLY OAKS

City State Zip Code  
ALEXANDRIA LA 71301

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

Name of Employer Occupation  
RED RIVER BANK BANKER

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 : SA11AI.5129**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. J WENDELL CLARK**

Mailing Address 15905 ANIETAM STREET

City State Zip Code  
BATON ROUGE LA 70817

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

Name of Employer Occupation  
LONG LAW FIRM 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 : SA11AI.5031**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 7816 MAIN STREET  
PO BOX 2416

City State Zip Code  
HOUMA LA 70361

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

Name of Employer Occupation  
TERREBONNE PARISH 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 : SA11AI.4933**

Amount of Each Receipt this Period  
2600.00

**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 16 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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

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

Mailing Address 3208 LAKE KRISTIN DRIVE

City State Zip Code  
GRETNA LA 70056

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

Name of Employer Occupation  
DAVID L. COLVIN & ASSOC. 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 / 25 / 2014

**Transaction ID : SA11AI.5067**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MS. MADELEINE C CONGER**

Mailing Address 915 DREHR AVE

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
BEST EFFORTS INFORMATION REQUESTED BEST EFFORTS 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 / 18 / 2014

**Transaction ID : SA11AI.4922**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 650 POYDRAS STREET, #2345

City State Zip Code  
NEW ORLEANS LA 70130

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

Name of Employer Occupation  
PONTCHARTRAIN PARTNERS, LLC PARTNER

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 / 27 / 2014

**Transaction ID : SA11AI.4942**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00



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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 17 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**RUFFIN B CORDELL**

Mailing Address 512 JANNEYS LANE

City State Zip Code  
ALEXANDRIA VA 22302

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

Name of Employer Occupation  
FISH & RICHARDSON PC PRINCIPAL

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 / 31 / 2014

**Transaction ID : SA11AI.4992**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO BOX 433

City State Zip Code  
MATHEWS LA 70375

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

Name of Employer Occupation  
JNB OPERATING, LLC MEMBER

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 : SA11AI.4959**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 116 MEADOWBROOK DRIVE

City State Zip Code  
GRETNA LA 70056

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

Name of Employer Occupation  
DAUL INSURANCE AGENCY, INC. PRESIDENT AND 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 / 25 / 2014

**Transaction ID : SA11AI.4939**

Amount of Each Receipt this Period  
500.00

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

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

4100.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**AMY M DEJEAN**

Mailing Address 14556 MEMORIAL DRIVE

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
WIRELESS IQ 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 / 31 / 2014

**Transaction ID : SA11AI.5118**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**DELTA LAUNCH SERVICES LLC**

Mailing Address 3813 N CAUSEWAY BLVD #100

City State Zip Code  
METAIRIE LA 70002

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2300.00

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

**Transaction ID : SA11AI.5074**

Amount of Each Receipt this Period  
2300.00

LLC INFORMATION REQUESTED

**C.** Full Name (Last, First, Middle Initial)  
**TILDON J DUFRENE JR.**

Mailing Address 1217 ST. MICHAEL DRIVE

City State Zip Code  
HARVEY LA 70058

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

Name of Employer Occupation  
BEST EFFORTS INFORMATION REQUESTED BEST EFFORTS 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 Y Y  
 03 / 31 / 2014

**Transaction ID : SA11AI.5126**

Amount of Each Receipt this Period  
500.00

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

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

3800.00

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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 19 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**TERESE L DUPRE**

Mailing Address 131 MOUND AVENUE

City State Zip Code  
NEW ORLEANS LA 70124

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

Name of Employer Occupation  
MEYER ENGINEERS, LTD. DIRECTOR OF BUSINESS DEVELOPMENT

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 / 25 / 2014

**Transaction ID : SA11AI.5053**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4061 TURTLE BAYOU DRIVE

City State Zip Code  
KENNER LA 70065

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

Name of Employer Occupation  
DIGITAL ENGINEERING AND IMAGING CHIEF EXECUTIVE OFFICER

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 / 25 / 2014

**Transaction ID : SA11AI.5050**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. JIMMY R FAIRCLOTH**

Mailing Address 4450 STILLMEADOW LANE

City State Zip Code  
PINEVILLE LA 71360

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

Name of Employer Occupation  
SELF ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.5032**

Amount of Each Receipt this Period  
2600.00

**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 20 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JIMMY R FAIRCLOTH**

Mailing Address 4450 STILLMEADOW LANE

City State Zip Code  
PINEVILLE LA 71360

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

Name of Employer Occupation  
SELF ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

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

**Transaction ID : SA11AI.5033**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 720 HAMILTON STREET

City State Zip Code  
LAROSE LA 70373

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

Name of Employer Occupation  
TED M. FALGOUT & ASSOCIATES 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 Y Y  
03 / 31 / 2014

**Transaction ID : SA11AI.4987**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO BOX 82285

City State Zip Code  
BATON ROUGE LA 70884

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

Name of Employer Occupation  
PERFORMANCE CONTRACTORS, INC. CONTRACTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.5055**

Amount of Each Receipt this Period  
2600.00

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

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

6200.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ART FAVRE</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 25 / 2014 |
| Mailing Address PO BOX 82285  |                                   | <b>Transaction ID : SA11AI.5056</b>                      |
| City<br>BATON ROUGE   | State<br>LA                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2400.00            |
| Name of Employer<br>PERFORMANCE CONTRACTORS, INC.   | Occupation<br>CONTRACTOR          |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>5000.00 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. WILLIAM H FENSTERMAKER</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |
| Mailing Address 135 REGENCY SQUARE  |                                   | <b>Transaction ID : SA11AI.4919</b>                      |
| City<br>LAFAYETTE   | State<br>LA                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2500.00            |
| Name of Employer<br>CH FENSTERMAKER & ASSOC.  | Occupation<br>EXECUTIVE           |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2500.00 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. JOHN FIFE</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |
| Mailing Address 1860 OLD PLANTATION LN.   |                                   | <b>Transaction ID : SA11AI.5110</b>                      |
| City<br>BATON ROUGE   | State<br>LA                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1000.00            |
| Name of Employer<br>ARDEL CONSTRUCTORS  | Occupation<br>EXECUTIVE           |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00 |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 5900.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 22 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. RALPH P FONTCUBERTA JR.**

Mailing Address 534 WILLIAMS BLVD

City State Zip Code  
KENNER LA 70062

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

Name of Employer Occupation  
BFM CORPORATION CHIEF EXECUTIVE OFFICER

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 / 25 / 2014

**Transaction ID : SA11AI.5065**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**TIFFENY FRANCIS**

Mailing Address 5219 KENTON PLACE LANE

City State Zip Code  
FULSHEAR TX 77441

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

Name of Employer Occupation  
BEST EFFORTS INFORMATION REQUESTED BEST EFFORTS 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  
 03 / 18 / 2014

**Transaction ID : SA11AI.4931**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 126 FLORIBEL AVE.

City State Zip Code  
SAN ANSELMO CA 94960

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

Name of Employer Occupation  
SELF CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.4960**

Amount of Each Receipt this Period  
2600.00

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

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

4100.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**ALAN FRONT**

Mailing Address 126 FLORIBEL AVE.

City SAN ANSELMO State CA Zip Code 94960

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

Name of Employer SELF Occupation CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

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

**Transaction ID : SA11AI.4961**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. BLAKE GABLE**

Mailing Address 375 PUTTER POINTE

City NAPLES State FL Zip Code 34103

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

Name of Employer BARRON COLLIER COMPANY Occupation VP, REAL ESTATE

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 / 31 / 2014

**Transaction ID : SA11AI.4906**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 929 E LAKEVIEW DRIVE

City BATON ROUGE State LA Zip Code 70810

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

Name of Employer COASTAL ENVIRONMENTAL INC. Occupation EXECUTIVE

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 / 31 / 2014

**Transaction ID : SA11AI.4985**

Amount of Each Receipt this Period  
1500.00

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

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

5100.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS M GATTLE III**

Mailing Address 1042 CAMELLA BLVD  
APT H5210

City LAFAYETTE State LA Zip Code 70508

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

Name of Employer TERRAL RIVERSERVICE, INC. Occupation FOUNDER

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 / 31 / 2014

**Transaction ID : SA11AI.4984**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**TERRENCE GINN**

Mailing Address TERRENCE.GINN@GMAIL.COM

City FORDOCHE State LA Zip Code 70732

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

Name of Employer STATE OF LA Occupation ASSOCIATE COMMISSIONER

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 / 01 / 2014

**Transaction ID : SA11AI.4971**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2929 SVENDSON DRIVE

City BATON ROUGE State LA Zip Code 70809

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

Name of Employer CAJUN CONSTRUCTORS Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.4932**

Amount of Each Receipt this Period  
2600.00

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

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

3850.00



**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**ALYSIA P GRAVES**

Mailing Address 14555 MEMORIAL TOWER DRIVE

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| BATON ROUGE | LA    | 70810    |

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

|                               |                         |
|-------------------------------|-------------------------|
| Name of Employer<br>HOMEMAKER | Occupation<br>HOMEMAKER |
|-------------------------------|-------------------------|

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.4928**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**ALYSIA P GRAVES**

Mailing Address 14555 MEMORIAL TOWER DRIVE

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| BATON ROUGE | LA    | 70810    |

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

|                               |                         |
|-------------------------------|-------------------------|
| Name of Employer<br>HOMEMAKER | Occupation<br>HOMEMAKER |
|-------------------------------|-------------------------|

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

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

**Transaction ID : SA11AI.4929**

Amount of Each Receipt this Period  
2400.00

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

Mailing Address 1120 ROBERT ST

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| NEW ORLEANS | LA    | 70115-2912 |

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

|  |                            |
|--|----------------------------|
| Name of Employer<br>EVANS-GRAVES ENGINEERS | Occupation<br>VP MARKETING |
|--|----------------------------|

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.5084**

Amount of Each Receipt this Period  
2600.00

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

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

7600.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MS. ASHLYN A GRAVES</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |  |
| Mailing Address 1120 ROBERT ST  |                                   | <b>Transaction ID : SA11AI.5085</b>                      |  |
| City<br>NEW ORLEANS   | State<br>LA                       | Zip Code<br>70115-2912                                   |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2600.00            |  |
| Name of Employer<br>EVANS-GRAVES ENGINEERS  | Occupation<br>VP MARKETING        |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>5200.00 |  |  |

|  |                                   |  |  |
|--|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MS. ASHLYN A GRAVES</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |  |
| Mailing Address 1120 ROBERT ST   |                                   | <b>Transaction ID : SA11AI.5086</b>                      |  |
| City<br>NEW ORLEANS  | State<br>LA                       | Zip Code<br>70115-2912                                   |  |
| FEC ID number of contributing federal political committee.<br>C  |                                   | Amount of Each Receipt this Period<br>2600.00            |  |
| Name of Employer<br>EVANS-GRAVES ENGINEERS   | Occupation<br>VP MARKETING        |  |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) Runoff | Election Cycle-to-Date<br>7800.00 |  |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CYNTHIA S GRAVES</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |  |
| Mailing Address 1933 OLD CARRIAGE LANE  |                                   | <b>Transaction ID : SA11AI.4997</b>                      |  |
| City<br>BATON ROUGE   | State<br>LA                       | Zip Code<br>70806  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2600.00            |  |
| Name of Employer<br>HOMEMAKER   | Occupation<br>HOMEMAKER           |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2600.00 |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 7800.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 7800.00 |

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**CYNTHIA S GRAVES**

Mailing Address 1933 OLD CARRIAGE LANE

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

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

**Transaction ID : SA11AI.4998**

Amount of Each Receipt this Period  
**2600.00**

**B.** Full Name (Last, First, Middle Initial)  
**CYNTHIA S GRAVES**

Mailing Address 1933 OLD CARRIAGE LANE

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
**7800.00**

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

**Transaction ID : SA11AI.4999**

Amount of Each Receipt this Period  
**2600.00**

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

Mailing Address 4273 HARVARD AVE

City State Zip Code  
BATON ROUGE LA 70808-4623

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

Name of Employer Occupation  
BEST EFFORTS INFORMATION REQUESTED BEST EFFORTS INFORMATION REQUESTED

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 : SA11AI.5096**

Amount of Each Receipt this Period  
**2600.00**

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

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

**7800.00**

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MR. JOHN A GRAVES</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |  |
| Mailing Address 1933 OLD CARRIAGE LN  |                                   | <b>Transaction ID : SA11AI.5092</b>                      |  |
| City<br>BATON ROUGE   | State<br>LA                       | Zip Code<br>70806  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2600.00            |  |
| Name of Employer<br>EVANS-GRAVES ENGINEERS, INC.  | Occupation<br>OWNER               |  |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2600.00 |  |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MR. JOHN A GRAVES</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |  |
| Mailing Address 1933 OLD CARRIAGE LN  |                                   | <b>Transaction ID : SA11AI.5093</b>                      |  |
| City<br>BATON ROUGE   | State<br>LA                       | Zip Code<br>70806  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2600.00            |  |
| Name of Employer<br>EVANS-GRAVES ENGINEERS, INC.  | Occupation<br>OWNER               |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>5200.00 |  |  |

|  |                                   |  |  |
|--|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. MR. JOHN A GRAVES</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |  |
| Mailing Address 1933 OLD CARRIAGE LN   |                                   | <b>Transaction ID : SA11AI.5094</b>                      |  |
| City<br>BATON ROUGE  | State<br>LA                       | Zip Code<br>70806  |  |
| FEC ID number of contributing federal political committee.<br>C  |                                   | Amount of Each Receipt this Period<br>2600.00            |  |
| Name of Employer<br>EVANS-GRAVES ENGINEERS, INC.   | Occupation<br>OWNER               |  |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) Runoff | Election Cycle-to-Date<br>7800.00 |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 7800.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 7800.00 |

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

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

Mailing Address 4273 HARVARD AVE

City State Zip Code  
BATON ROUGE LA 70808

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

Name of Employer Occupation  
RAISIN CANE'S EXECUTIVE

Receipt For: 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 : SA11AI.5095**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 1125 INGELSIDE DRIVE

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
CAJUN CONSTRUCTORS EXECUTIVE

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 : SA11AI.4930**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 5396 COURTYARD DR.

City State Zip Code  
GONZALES LA 70737

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

Name of Employer Occupation  
GUIDRY ASSOCIATES GOVERNMENT RELATIONS EXECUTIVE

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 / 24 / 2014

**Transaction ID : SA11AI.4954**

Amount of Each Receipt this Period  
1000.00

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

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

6200.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**ANGELLE G HAMILTON**

Mailing Address 31 - 26TH STREET NW

City ATLANTA State GA Zip Code 30309

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

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

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 : SA11AI.5017**

Amount of Each Receipt this Period  
 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**ANGELLE G HAMILTON**

Mailing Address 31 - 26TH STREET NW

City ATLANTA State GA Zip Code 30309

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

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

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 : SA11AI.5018**

Amount of Each Receipt this Period  
 5200.00

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

Mailing Address 31 - 26TH STREET NW

City ATLANTA State GA Zip Code 30309

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5019**

Amount of Each Receipt this Period  
 2600.00

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

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

7800.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**JACK A HAMILTON**

Mailing Address **31 - 26TH STREET**

City ATLANTA State GA Zip Code 30309

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

Name of Employer **HALLIDE AMERICA, INC.** 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 Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11AI.5002**

Amount of Each Receipt this Period  
**2600.00**

**B.** Full Name (Last, First, Middle Initial)  
**JACK A HAMILTON**

Mailing Address **31 - 26TH STREET**

City ATLANTA State GA Zip Code 30309

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

Name of Employer **HALLIDE AMERICA, INC.** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

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

**Transaction ID : SA11AI.5003**

Amount of Each Receipt this Period  
**2600.00**

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

Mailing Address **31 - 26TH STREET**

City ATLANTA State GA Zip Code 30309

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

Name of Employer **HALLIDE AMERICA, INC.** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify) **Runoff**

Election Cycle-to-Date **7800.00**

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

**Transaction ID : SA11AI.5004**

Amount of Each Receipt this Period  
**2600.00**

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

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

**7800.00**

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>RAYMOND HECK</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>03 / 31 / 2014 |
| Mailing Address 7330 LASALLE AVE  |                                   | <b>Transaction ID : SA11AI.5103</b>                          |
| City<br>BATON ROUGE   | State<br>LA                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2600.00                |
| Name of Employer<br>R.E. HECK INC.  | Occupation<br>EXECUTIVE           |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2600.00 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>MICHAEL HENRY</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>03 / 19 / 2014 |
| Mailing Address 325 MARYLAND AVE., NE   |                                   | <b>Transaction ID : SA11AI.4957</b>                          |
| City<br>WASHINGTON  | State<br>DC                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2600.00                |
| Name of Employer<br>ALPINE GROUP  | Occupation<br>LOBBYIST            |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2600.00 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>MICHAEL HENRY</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>03 / 19 / 2014 |
| Mailing Address 325 MARYLAND AVE., NE   |                                   | <b>Transaction ID : SA11AI.5082</b>                          |
| City<br>WASHINGTON  | State<br>DC                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2600.00                |
| Name of Employer<br>ALPINE GROUP  | Occupation<br>LOBBYIST            |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>5200.00 |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 7800.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |



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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 33 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

|   |                                   |  |   |
|---|-----------------------------------|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. GREGORY F HOLT</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |   |
| Mailing Address 365 CANAL STREET<br>SUITE 1410  |                                   | <b>Transaction ID : SA11AI.4913</b>                      |   |
| City<br>NEW ORLEANS   | State<br>LA                       | Zip Code<br>70130  | Amount of Each Receipt this Period<br>2600.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                   |  |   |
| Name of Employer<br>DAYBROOK FISHERIES, INC.  | Occupation<br>PRESIDENT           |  |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2600.00 |  |   |

|   |                                   |  |   |
|---|-----------------------------------|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. GREGORY F HOLT</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |   |
| Mailing Address 365 CANAL STREET<br>SUITE 1410  |                                   | <b>Transaction ID : SA11AI.4914</b>                      |   |
| City<br>NEW ORLEANS   | State<br>LA                       | Zip Code<br>70130  | Amount of Each Receipt this Period<br>2600.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                   |  |   |
| Name of Employer<br>DAYBROOK FISHERIES, INC.  | Occupation<br>PRESIDENT           |  |   |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>5200.00 |  |   |

|   |   |  |   |
|---|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. LAUREN HOLT</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |   |
| Mailing Address 5 RIDGEDALE AVE   |   | <b>Transaction ID : SA11AI.5104</b>                      |   |
| City<br>SUMMIT  | State<br>NJ                                     | Zip Code<br>07901  | Amount of Each Receipt this Period<br>2600.00 |
| FEC ID number of contributing federal political committee.<br>C   |   |  |   |
| Name of Employer<br>DAYBROOK FISHERIES  | Occupation<br>DIRECTOR, CORPORATE COMMUNICATION |  |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2600.00               |  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 7800.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 34 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**CHRIS HUMPHREYS**

Mailing Address 19 BELLE GROVE DR

City State Zip Code  
DESTREHAN LA 70047

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

Name of Employer Occupation  
PSI, INC. VP

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 : SA11AI.5102**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. KEN JACOB**

Mailing Address 2883 E LAKESHORE DRIVE

City State Zip Code  
BATON ROUGE LA 70808

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

Name of Employer Occupation  
CAJUN CONSTRUCTORS EXECUTIVE

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 : SA11AI.4926**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 6038 SAINT CHARLES AVE

City State Zip Code  
NEW ORLEANS LA 70118

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

Name of Employer Occupation  
STRATEGIC COMP INSURANCE ADMINISTRATION

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 / 16 / 2014

**Transaction ID : SA11AI.4964**

Amount of Each Receipt this Period  
1000.00

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

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

4100.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

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

Mailing Address **2324 DOGWOOD AVE**

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

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

Name of Employer **SABISTON CONSULTANTS** Occupation **VP**

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 : SA11AI.5123**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**TIM JARQUIN**

Mailing Address **650 POYDRAS STREET, #2345**

City **NEW ORLEANS** State **LA** Zip Code **70130**

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

Name of Employer **PONTCHARTRAIN PARTNERS, LLC** Occupation **PARTNER**

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 / 27 / 2014**

**Transaction ID : SA11AI.4943**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **9226 LAKE BRADDOCK DRIVE**

City **BURKE** State **VA** Zip Code **22015**

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

Name of Employer **JONES WALKER LLP** 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 / 26 / 2014**

**Transaction ID : SA11AI.4949**

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 36 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**JEFFREY S JENKINS**

Mailing Address 7102 MONITEAU COURT

City State Zip Code  
BATON ROUGE LA 70809

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

Name of Employer Occupation  
BERNHARD CAPITAL PARTNERS PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.5080**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. CHRISTOPHER K JONES**

Mailing Address 770 NELSON DR

City State Zip Code  
BATON ROUGE LA 70808

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

Name of Employer Occupation  
KEOUGH, COX AND WILSON ATTORNEY

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 / 31 / 2014

**Transaction ID : SA11AI.5027**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH E JUBAN**

Mailing Address 989 CARROLLTON AVE

City State Zip Code  
BATON ROUGE LA 70806

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

Name of Employer Occupation  
LONG LAW FIRM 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 / 31 / 2014

**Transaction ID : SA11AI.5029**

Amount of Each Receipt this Period  
250.00

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

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

2750.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**JAMES F JUSTISS JR.**

Mailing Address **PO BOX 2990**

City **JENA** State **LA** Zip Code **71342**

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

Name of Employer **JUSTISS OIL COMPANY, INC.** Occupation **CHAIRMAN**

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 / 31 / 2014**

**Transaction ID : SA11AI.5114**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. JONATHAN N KERNION**

Mailing Address **24320 SANDERS RD**

City **COVINGTON** State **LA** Zip Code **70435**

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

Name of Employer **CYCLE CONSTRUCTION CO.** Occupation **PRESIDENT**

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 / 31 / 2014**

**Transaction ID : SA11AI.4905**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **508 E. WOODRUFF DRIVE**

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

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

Name of Employer **LONG LAW FIRM** Occupation **ATTORNEY**

Receipt For: 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 / 31 / 2014**

**Transaction ID : SA11AI.5028**

Amount of Each Receipt this Period  
**250.00**

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

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

**2250.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 38 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. KRISTOPHER S KIRKPATRICK**

Mailing Address 4318 BROUSSARD ST

City: BATON ROUGE State: LA Zip Code: 70808

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

Name of Employer: ROEDEL PARSONS Occupation: ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 31 / 2014

**Transaction ID : SA11AI.4908**

Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. KRISTOPHER S KIRKPATRICK**

Mailing Address 4318 BROUSSARD ST

City: BATON ROUGE State: LA Zip Code: 70808

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

Name of Employer: ROEDEL PARSONS Occupation: ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 862.32

Date of Receipt: 03 / 31 / 2014

**Transaction ID : SA11AI.5134**

Amount of Each Receipt this Period: 362.32

IN-KIND: FOOD & BEVERAGE

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

Mailing Address 4176 CANAL STREET

City: NEW ORLEANS State: LA Zip Code: 70119

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

Name of Employer: BURK-KLEINPETER ENGINEERS Occupation: EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 31 / 2014

**Transaction ID : SA11AI.5125**

Amount of Each Receipt this Period: 500.00

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

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

1362.32

**SCHEDULE A (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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

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

Mailing Address 225 METAIRIE HEIGHTS AVE

City METAIRIE State LA Zip Code 70001

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

Name of Employer VILLAGE AT RIVERWOOD Occupation REAL ESTATE

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 / 25 / 2014

**Transaction ID : SA11AI.5045**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**JOHN P LAUGHLIN JR.**

Mailing Address 1910 WILLOW STREET

City HARVEY State LA Zip Code 70058

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

Name of Employer BETA TESTING & INSPECTION, LLC Occupation EXECUTIVE

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 / 25 / 2014

**Transaction ID : SA11AI.5022**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 4273 HARVARD AVE

City BATON ROUGE State LA Zip Code 70808-4623

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5036**

Amount of Each Receipt this Period  
 2600.00

LLC INFORMATION REQUESTED

**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 40 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**LORI LEBLANC**

Mailing Address 152 GRAND LAKES DRIVE

City State Zip Code  
THIBODAUX LA 70301

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

Name of Employer Occupation  
LORI LEBLANC LLC 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 : SA11AI.5013**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD LEGENDRE**

Mailing Address 1320 CLYDE DR

City State Zip Code  
MARRERO LA 70070-3610

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11AI.4901**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 650 MASSACHUSETTS AVE NE

City State Zip Code  
WASHINGTON DC 20002

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11AI.5001**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00



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

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

FOR LINE NUMBER: PAGE 41 OF 94  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. LAWRENCE E MARINO**

Mailing Address 551 ESPLANADE DR

City LAFAYETTE State LA Zip Code 70508

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

Name of Employer Occupation  
**BEST EFFORTS INFORMATION REQUESTED BEST EFFORTS 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 / 31 / 2014

**Transaction ID : SA11AI.4903**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MRS. EVA SUMMERS MARKS**

Mailing Address 21695 WATERFRONT EAST DRIVE

City MAUREPAS State LA Zip Code 70449

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

Name of Employer Occupation  
**HOMEMAKER HOMEMAKER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.4976**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 8733 SIGEN LANE #380

City BATON ROUGE State LA Zip Code 70810

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

Name of Employer Occupation  
**MARTIN TERMINAL INC EXECUTIVE**

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 : SA11AI.4983**

Amount of Each Receipt this Period  
 1000.00

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

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

3500.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 42 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**JAMES D MASSIE**

Mailing Address 501 HIGH STREET

City State Zip Code  
ALEXANDRIA VA 22032

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

Name of Employer Occupation  
THE ALPINE GROUP, INC. PRINCIPAL

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 / 31 / 2014

**Transaction ID : SA11AI.5011**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 3248 MCCLENDON CT.

City State Zip Code  
BATON ROUGE LA 70810

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

Name of Employer Occupation  
MARTIN ECOSYSTEMS EXECUTIVE

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 / 25 / 2014

**Transaction ID : SA11AI.5048**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 1702 19TH STREET NW

City State Zip Code  
WASHINGTON DC 20009

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

Name of Employer Occupation  
MCBRIDGE & ASSOC PRESIDENT

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 / 18 / 2014

**Transaction ID : SA11AI.4934**

Amount of Each Receipt this Period  
500.00

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

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

4100.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 43 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**ANDREW MCCANDLESS**

Mailing Address 131 UNIVERSITY HIGHLAND CT

City State Zip Code  
BATON ROUGE LA 70808

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

Name of Employer Occupation  
BASCOM HUNTER ENGINEER

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 / 28 / 2014

**Transaction ID : SA11AI.4973**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO BOX 763

City State Zip Code  
METAIRIE LA 70004

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

Name of Employer Occupation  
MEYER ENGINEERS LTD 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 / 25 / 2014

**Transaction ID : SA11AI.5049**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**R.E. BON MILLER**

Mailing Address P.O BOX 3616

City State Zip Code  
MORGAN CITY LA 70381

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

Name of Employer Occupation  
MAJOR EQUIPMENT & REMEDIATION 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 : SA11AI.4958**

Amount of Each Receipt this Period  
2600.00

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

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

4100.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**KAY S MORGAN**

Mailing Address 8105 OLD HAMMOND HIGHWAY

City State Zip Code  
BATON ROUGE LA 70809

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.5060**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. RUSSELL L MOSELY**

Mailing Address 4316 CLAYCUT RD

City State Zip Code  
BATON ROUGE LA 70806-7006

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

Name of Employer Occupation  
MOSELY LAW ATTORNEY

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 / 31 / 2014

**Transaction ID : SA11AI.5097**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO BOX 278  
13880 RIVER ROAD

City State Zip Code  
DESTREHAN LA 70047

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

Name of Employer Occupation  
SHAMPOO HAIRDRESSER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.5124**

Amount of Each Receipt this Period  
2500.00

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

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

4000.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 45 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CW NORMAN</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |  |
| Mailing Address 8001 OLD NORMANDIE LANE   |  | <b>Transaction ID : SA11AI.4899</b>                      |  |
| City<br>BATON ROUGE   | State<br>LA                                      | Zip Code<br>70806  |  |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>1000.00            |  |
| Name of Employer<br>BEST EFFORTS INFORMATION REQUESTED  | Occupation<br>BEST EFFORTS INFORMATION REQUESTED |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00                |  |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MS. GAIL R O'QUIN</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 18 / 2014 |  |
| Mailing Address 2651 KLEINERT AVE   |                                   | <b>Transaction ID : SA11AI.4924</b>                      |  |
| City<br>BATON ROUGE   | State<br>LA                       | Zip Code<br>70806  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2000.00            |  |
| Name of Employer<br>HOMEMAKER   | Occupation<br>HOMEMAKER           |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2000.00 |  |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. O.W. O'QUIN</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 18 / 2014 |  |
| Mailing Address 2651 LEINERT AVE  |                                   | <b>Transaction ID : SA11AI.4925</b>                      |  |
| City<br>BATON ROUGE   | State<br>LA                       | Zip Code<br>70806  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2000.00            |  |
| Name of Employer<br>SELF  | Occupation<br>INSURANCE           |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2000.00 |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 5000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 5000.00 |

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

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

FOR LINE NUMBER: PAGE 46 OF 94  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. STEPHEN J OATS**

Mailing Address 616 MYRTLE PLACE BLVD

City State Zip Code  
LAFAYETTE LA 70506

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
OATS & HUDSON ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.4904**

Amount of Each Receipt this Period

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

Mailing Address 345 HARBOR DRIVE

City State Zip Code  
OLD HICKORY TN 37138

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF-EMPLOYED CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.5111**

Amount of Each Receipt this Period

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

Mailing Address 222 UNIVERSITY HIGHLANDS COURT

City State Zip Code  
BATON ROUGE LA 70817

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
BEST EFFORTS INFORMATION REQUESTED BEST EFFORTS INFORMATION REQUESTED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.5030**

Amount of Each Receipt this Period

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

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

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 47 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>RAYMOND PAUL</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 27 / 2014 |  |
| Mailing Address 2805 FARM RD  |                                   | <b>Transaction ID : SA11AI.4941</b>                      |  |
| City<br>ALEXANDRIA  | State<br>VA                       | Zip Code<br>22302  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1000.00            |  |
| Name of Employer<br>KOCH COMPANIES PUBLIC SECTOR, LLC   | Occupation<br>DIRECTOR            |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00 |  |  |

|   |                                       |  |  |
|---|---------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>DAVID A PIERCE</b>  |                                       | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 25 / 2014 |  |
| Mailing Address 327 WORTH AVENUE  |                                       | <b>Transaction ID : SA11AI.5021</b>                      |  |
| City<br>LAFAYETTE   | State<br>LA                           | Zip Code<br>70508  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                       | Amount of Each Receipt this Period<br>1500.00            |  |
| Name of Employer<br>ACADIAN AMBULANCE   | Occupation<br>CHIEF OPERATING OFFICER |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1500.00     |  |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>BILLY PLAUCHE</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 28 / 2014 |  |
| Mailing Address 18216 125TH AVE SW  |                                   | <b>Transaction ID : SA11AI.5112</b>                      |  |
| City<br>VASHON  | State<br>WA                       | Zip Code<br>98070  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1000.00            |  |
| Name of Employer<br>PLAUCHE & CARR  | Occupation<br>PARTNER             |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00 |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 3500.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | _____   |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 48 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**JAMES PRATHER III**

Mailing Address 20138 DAVIS LANE

City State Zip Code  
PONCHATOULA LA 70454

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

Name of Employer Occupation  
ELOS ENVIRONMENTAL VP, ENVIRONMENTAL SCIENTIST

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 : SA11AI.4980**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**TEDDY R PRICE**

Mailing Address PO BOX 1438

City State Zip Code  
WINNFIELD LA 71483

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

Name of Employer Occupation  
CENTRAL MANAGEMENT COMPANY, LLC EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11AI.5117**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL L PUGH JR.**

Mailing Address 28 CASTLE PINES DRIVE

City State Zip Code  
NEW ORLEANS LA 70131

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

Name of Employer Occupation  
ROYAL ENGINEERS EXECUTIVE

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 : SA11AI.4978**

Amount of Each Receipt this Period  
2600.00

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

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

5100.00



**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

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

Mailing Address 5405 DAVID DRIVE

City State Zip Code  
KENNER LA 70065

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

Name of Employer Occupation  
MEYER ENGINEERS CONSTRUCTION

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 / 25 / 2014

**Transaction ID : SA11AI.5051**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**PHILIP W REBOWE**

Mailing Address 416 TIMBERLANE DRIVE

City State Zip Code  
GRETNA LA 70056

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

Name of Employer Occupation  
REBOWE AND CO. ACCOUNTANT

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 / 25 / 2014

**Transaction ID : SA11AI.4938**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. KEVIN P REILLY**

Mailing Address PO BOX 66338

City State Zip Code  
BATON ROUGE LA 70896

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

Name of Employer Occupation  
LAMAR EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.5090**

Amount of Each Receipt this Period  
2600.00

**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 50 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

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

Mailing Address **PO BOX 66338**

City **BATON ROUGE** State **LA** Zip Code **70896**

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

Name of Employer **LAMAR** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

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

**Transaction ID : SA11AI.5091**

Amount of Each Receipt this Period  
**2400.00**

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM K RHINEHART**

Mailing Address **18912 JARDIN CT.**

City **BATON ROUGE** State **LA** Zip Code **70817**

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

Name of Employer **ROYAL ENGINEERING** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

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

**Transaction ID : SA11AI.4979**

Amount of Each Receipt this Period  
**2600.00**

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

Mailing Address **6793 FATHER JOHN CT**

City **MCLEAN** State **VA** Zip Code **22101**

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

Name of Employer **CASSIDY & ASSOC.** Occupation **GOVERNMENT RELATIONS**

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 / 27 / 2014**

**Transaction ID : SA11AI.4946**

Amount of Each Receipt this Period  
**250.00**

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

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

**5250.00**

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**CLIFFORD M RICCIO JR.**

Mailing Address 4810 25TH STREET N

City ARLINGTON State VA Zip Code 22207

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

Name of Employer NATIONAL CABLE & TELECOM CORP Occupation VP

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 : SA11AI.5039**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. CHRISTIAN B RINGO**

Mailing Address 12347 OAK FIELD DR

City GEISMAR State LA Zip Code 70734

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

Name of Employer SELF Occupation DENTAL ASSISTANT

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 : SA11AI.5034**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. JONATHAN S RINGO**

Mailing Address 12347 OAK FIELD DR

City GEISMAR State LA Zip Code 70734

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

Name of Employer FAIRCLOTH LAW GROUP Occupation ATTORNEY

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 : SA11AI.5035**

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 52 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

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

Mailing Address 18250 S. MISSION HILLS AVE

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| BATON ROUGE | LA    | 70810    |

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

|                      |            |
|----------------------|------------|
| Name of Employer     | Occupation |
| INDUSTRIAL SPECIALTY | EXECUTIVE  |

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 : SA11AI.4988**

Amount of Each Receipt this Period

2600.00

**B.** Full Name (Last, First, Middle Initial)  
**LINDA L RISPONE**

Mailing Address 18250 S MISSION HILLS ROAD

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| BATON ROUGE | LA    | 70810    |

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

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

Receipt For: 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 : SA11AI.4995**

Amount of Each Receipt this Period

2600.00

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

Mailing Address PO BOX 6085

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| ALEXANDRIA | LA    | 71307    |

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

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
| CREST INDUSTRIES | EXECTUIVE  |

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 : SA11AI.5121**

Amount of Each Receipt this Period

1000.00

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

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

6200.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. M WESLEY SALMON</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 01 / 2014 |  |
| Mailing Address 813 DELGADO   |                                  | <b>Transaction ID : SA11AI.4970</b>                      |  |
| City<br>BATON ROUGE   | State<br>LA                      | Zip Code<br>70808  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>500.00             |  |
| Name of Employer<br>KEYSTONE ENGINEERING  | Occupation<br>CFO                |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |  |  |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. PAUL SAWYER</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |  |
| Mailing Address 11814 LAKE ESTATES AVE.   |   | <b>Transaction ID : SA11AI.5109</b>                      |  |
| City<br>BATON ROUGE   | State<br>LA                                 | Zip Code<br>70810  |  |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>250.00             |  |
| Name of Employer<br>LOUISIANA ECONOMIC DEVELOPMENT  | Occupation<br>DIRECTOR OF FEDERAL PROGRAMSL |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00            |  |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. GEORGE SCHAFFER</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 25 / 2014 |  |
| Mailing Address 341 3RD STREET  |                                   | <b>Transaction ID : SA11AI.5072</b>                      |  |
| City<br>BATON ROUGE   | State<br>LA                       | Zip Code<br>70801  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2600.00            |  |
| Name of Employer<br>CROMPION INTERNATIONAL  | Occupation<br>PRESIDENT           |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2600.00 |  |  |

|   |             |
|---|-------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 3350.00     |
| <b>TOTAL</b> This Period (last page this line number only)..... | [Empty Box] |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 54 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**JAN SCHOONMAKER**

Mailing Address 147 E. STREET SE

City WASHINGTON State DC Zip Code 20003

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

Name of Employer VAN SCOYOC ASSOCIATES Occupation VP

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 : SA11AI.4991**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**VANCE SCHUEMANN**

Mailing Address 505 CATHEDRAL DR.

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer VIACOM Occupation VP GOVERNMENT AFFAIRS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.4952**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 230 W WINDSOR AVE

City ALEXANDRIA State VA Zip Code 22301

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

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 : SA11AI.5005**

Amount of Each Receipt this Period  
 1000.00

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

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

1750.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 55 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**SCOTT SHIELDS**

Mailing Address **5 RIDGEDALE AVE**

City **SUMMIT** State **NJ** Zip Code **07901**

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

Name of Employer **SELF EMPLOYED** Occupation **DESIGNER**

Receipt For: 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 : SA11AI.5105**

Amount of Each Receipt this Period  
 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**ANN SPRINGSTON SHIRES**

Mailing Address **9528 SAWGRASS BLVD**

City **DENHAM SPRINGS** State **LA** Zip Code **70726**

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

Name of Employer **BCG ENGINEERING & CONSULTING GROUP** Occupation **EXECUTIVE**

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 / 25 / 2014**

**Transaction ID : SA11AI.5023**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address **1520 O STREET NW, T3**

City **WASHINGTON** State **DC** Zip Code **20005**

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

Name of Employer **COVINGTON & BURLING** 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  
**03 / 27 / 2014**

**Transaction ID : SA11AI.4948**

Amount of Each Receipt this Period  
 1000.00

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

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

4100.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MS. NANCY SMITH</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 18 / 2014 |  |
| Mailing Address 125 OLD SCHRIEVER HWY   |                                   | <b>Transaction ID : SA11AI.4923</b>                      |  |
| City<br>SCHRIEVER   | State<br>LA                       | Zip Code<br>70395  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1000.00            |  |
| Name of Employer<br>TERRIBONNE PARISH SCHOOL BOARD  | Occupation<br>BOARD MEMBER        |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00 |  |  |

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. BILL K SNEED</b>   |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 25 / 2014 |  |
| Mailing Address 324 DORRINGTON  |                                  | <b>Transaction ID : SA11AI.5052</b>                      |  |
| City<br>METAIRIE  | State<br>LA                      | Zip Code<br>70005  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>500.00             |  |
| Name of Employer<br>HARTMAN   | Occupation<br>EXECUTIVE          |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |  |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CURTIS D SODERBERG</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |  |
| Mailing Address 1342 ELMCREST DRIVE   |                                   | <b>Transaction ID : SA11AI.4981</b>                      |  |
| City<br>BATON ROUGE   | State<br>LA                       | Zip Code<br>70808  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1000.00            |  |
| Name of Employer<br>CSRS INC  | Occupation<br>ARCHITECT           |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00 |  |  |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 2500.00       |
| <b>TOTAL</b> This Period (last page this line number only)..... | [Empty Field] |



**SCHEDULE A (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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. DONNA W STERNBERG**

Mailing Address **PO BOX 98100**

City **BATON ROUGE** State **LA** Zip Code **70898-9100**

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

Name of Employer **INSURANCE** Occupation **SALES**

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 / 18 / 2014**

**Transaction ID : SA11AI.4927**

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

**B.** Full Name (Last, First, Middle Initial)  
**MS. DONNA W STERNBERG**

Mailing Address **PO BOX 98100**

City **BATON ROUGE** State **LA** Zip Code **70898-9100**

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

Name of Employer **INSURANCE** Occupation **SALES**

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 / 25 / 2014**

**Transaction ID : SA11AI.5058**

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

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

Mailing Address **PO BOX 98100**

City **BATON ROUGE** State **LA** Zip Code **70898**

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

Name of Employer **STARMOUNT LIFE INSURANCE** Occupation **EXECUTIVE**

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 / 25 / 2014**

**Transaction ID : SA11AI.5071**

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

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

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

\_\_\_\_\_

\_\_\_\_\_

**2500.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 58 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT STERNHELL**

Mailing Address **27 ALLARD BLVD**

City **NEW ORLEANS** State **LA** Zip Code **70119**

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

Name of Employer **THE SOLUTIENT CORPORATION** Occupation **PRESIDENT**

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 / 25 / 2014**

**Transaction ID : SA11AI.5046**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**HEWITT STRANGE**

Mailing Address **4739 FAIRFIELD #1**

City **SHREVEPORT** State **LA** Zip Code **71106**

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

Name of Employer **SELF** Occupation **GOVERNMENT AFFAIRS**

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 / 26 / 2014**

**Transaction ID : SA11AI.4951**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**FRANK M STUART SR.**

Mailing Address **12 AZALEA CT.**

City **METAIRIE** State **LA** Zip Code **70005**

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

Name of Employer **STUART CONSULTING GROUP** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

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

**Transaction ID : SA11AI.5066**

Amount of Each Receipt this Period  
**500.00**

**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 59 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

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

Mailing Address 1501 3RD ST NW

City State Zip Code  
WASHINGTON DC 20001

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

Name of Employer Occupation  
TAUZIN CONSULTANTS, LLC CONSULTANTS

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 / 15 / 2014

**Transaction ID : SA11AI.4965**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**AUBREY T TEMPLE**

Mailing Address 4885 HWY 190 WEST

City State Zip Code  
DERIDDER LA 70634

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

Name of Employer Occupation  
SELF INSURANCE

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 : SA11AI.4935**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 4885 HWY 190 WEST

City State Zip Code  
DERIDDER LA 70634

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

Name of Employer Occupation  
SELF INSURANCE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3900.00

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

**Transaction ID : SA11AI.4936**

Amount of Each Receipt this Period  
1300.00

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

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

6500.00

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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 60 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. LINDA TEMPLE**

Mailing Address 3000 DALRYMPLE DRIVE

City State Zip Code  
BATON ROUGE LA 70802

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.4909**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**MS. LINDA TEMPLE**

Mailing Address 3000 DALRYMPLE DRIVE

City State Zip Code  
BATON ROUGE LA 70802

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3900.00

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

**Transaction ID : SA11AI.4910**

Amount of Each Receipt this Period  
1300.00

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

Mailing Address 5 ROSECREST AVE

City State Zip Code  
ALEXANDRIA VA 22301

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

Name of Employer Occupation  
CORNERSTONE GOVERNMENT MANAGEMENT

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 / 31 / 2014

**Transaction ID : SA11AI.5000**

Amount of Each Receipt this Period  
1000.00

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

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

4900.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 61 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>DAVID B TRENT</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 25 / 2014 |  |
| Mailing Address 4861 PORTRUSH DRIVE   |                                   | <b>Transaction ID : SA11AI.5059</b>                      |  |
| City<br>LAKE CHARLES  | State<br>LA                       | Zip Code<br>70605  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2300.00            |  |
| Name of Employer<br>LAKE CHARLES RIVER PILOTS   | Occupation<br>PRESIDENT           |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2300.00 |  |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>MICHAEL D TURGEON</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |  |
| Mailing Address 147 UPPER MOUNTAIN AVE  |                                   | <b>Transaction ID : SA11AI.5016</b>                      |  |
| City<br>MONTCLAIR   | State<br>NJ                       | Zip Code<br>07042  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1000.00            |  |
| Name of Employer<br>PRICEWATERHOUSE   | Occupation<br>CPA                 |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00 |  |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>KEITH VANDER LEEST</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 03 / 2014 |  |
| Mailing Address 5 HEIGHTS ROAD  |                                   | <b>Transaction ID : SA11AI.4969</b>                      |  |
| City<br>RIDGEWOOD   | State<br>NJ                       | Zip Code<br>07450  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1000.00            |  |
| Name of Employer<br>AMERICAN EXPRESS  | Occupation<br>SENIOR MANAGER      |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00 |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 4300.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | _____   |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 62 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**JACK VICTORY**

Mailing Address 4012 ETHAN THOMAS DRIVE

City State Zip Code  
CLINTON MD 20735

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

Name of Employer Occupation  
CAPITOL HILL CONSULTING GROUP CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11AI.4945**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**J. DAVID WAGGONER III**

Mailing Address

City State Zip Code

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

Name of Employer Occupation  
WAGGONER & BALL ARCHITECTS ARCHITECT

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 / 31 / 2014

**Transaction ID : SA11AI.4994**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 4067 NEW GETWELL ROAD

City State Zip Code  
MEMPHIS TN 38118

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

Name of Employer Occupation  
ST. AGNES ACADEMY YOUTH MINISTER

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 / 21 / 2014

**Transaction ID : SA11AI.4956**

Amount of Each Receipt this Period  
1500.00

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

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

4500.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 63 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**LEE WALKER**

Mailing Address 4723 GWYNNE ROAD

City MEMPHIS State TN Zip Code 38118

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

Name of Employer MECHANICAL SYSTEMS COMPANY, LLC Occupation 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 / 17 / 2014

**Transaction ID : SA11AI.4962**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**SARA W WALLACE**

Mailing Address 86 HARBOUR TOWN COURT

City NEW ORLEANS State LA Zip Code 70131

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

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 : SA11AI.4915**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 86 HARBOUR TOWN COURT

City NEW ORLEANS State LA Zip Code 70131

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

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 : SA11AI.4916**

Amount of Each Receipt this Period  
 2600.00

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

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

6700.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 64 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

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

Mailing Address 365 CANAL STREET  
SUITE 1410

City State Zip Code  
NEW ORLEANS LA 70130

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

Name of Employer Occupation  
DAYBROOK FISHERIES, INC. EXECUTIVE VICE PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.4911**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM B WALLACE**

Mailing Address 365 CANAL STREET  
SUITE 1410

City State Zip Code  
NEW ORLEANS LA 70130

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

Name of Employer Occupation  
DAYBROOK FISHERIES, INC. EXECUTIVE VICE PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

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

**Transaction ID : SA11AI.4912**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 43240 W. PLEASANT RIDGE ROAD

City State Zip Code  
HAMMOND LA 70403

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

Name of Employer Occupation  
ENVIRONMENTAL SCIENTIST PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.5054**

Amount of Each Receipt this Period  
500.00

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

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

5700.00



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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 65 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. LUCAS WATKINS**

Mailing Address 43240 W. PLEASANT RIDGE ROAD

City State Zip Code  
HAMMOND LA 70403

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

Name of Employer Occupation  
ENVIRONMENTAL SCIENTIST PRESIDENT

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 / 31 / 2014

**Transaction ID : SA11AI.4977**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. RANDALL R. WHITE**

Mailing Address 201 ST CHARLES AVE  
STE. 4411

City State Zip Code  
NEW ORLEANS LA 70170

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

Name of Employer Occupation  
CORPORATE REALTY SALES & MARKETING

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.5087**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. RANDALL R. WHITE**

Mailing Address 201 ST CHARLES AVE  
STE. 4411

City State Zip Code  
NEW ORLEANS LA 70170

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

Name of Employer Occupation  
CORPORATE REALTY SALES & MARKETING

Receipt For: 2014  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
5200.00

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

**Transaction ID : SA11AI.5088**

Amount of Each Receipt this Period  
2600.00

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

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

5700.00

**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 66 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. RANDALL R. WHITE**

Mailing Address **201 ST CHARLES AVE**  
**STE. 4411**

City **NEW ORLEANS** State **LA** Zip Code **70170**

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

Name of Employer **CORPORATE REALTY** Occupation **SALES & MARKETING**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7800.00**

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

**Transaction ID : SA11AI.5089**

Amount of Each Receipt this Period  
**2600.00**

**B.** Full Name (Last, First, Middle Initial)  
**ANN WILKINSON**

Mailing Address **3224 N RIVER ROAD**

City **PORT ALLEN** State **LA** Zip Code **70767**

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

Name of Employer **BEST EFFORTS INFORMATION REQUESTED** Occupation **BEST EFFORTS 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 / 25 / 2014**

**Transaction ID : SA11AI.5064**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **10711 THISTLEWOOD DRIVE**

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

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

Name of Employer **SIGMA CONSULTING** Occupation **EXECUTIVE**

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 / 31 / 2014**

**Transaction ID : SA11AI.4982**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4100.00**

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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 67 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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

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

Mailing Address 52C BRANDON HALL DRIVE

City State Zip Code  
DESTREHAN LA 70047

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

Name of Employer Occupation  
MOTIVA, NORCO REFINING COMPANY ENVIRONMENTAL COORDINATOR

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 / 27 / 2014

**Transaction ID : SA11AI.4947**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MICHELLE STEWART WOODS**

Mailing Address 39 BEVERLY GARDEN DRIVE

City State Zip Code  
METAIRIE LA 70001

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.5061**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 39 BEVERLY GARDEN DRIVE

City State Zip Code  
METAIRIE LA 70001

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

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

**Transaction ID : SA11AI.5062**

Amount of Each Receipt this Period  
2600.00

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

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

5700.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 68 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

|  |   |  |  |
|--|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. MICHELLE STEWART WOODS</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 25 / 2014 |  |
| Mailing Address 39 BEVERLY GARDEN DRIVE  |   | <b>Transaction ID : SA11AI.5063</b>                      |  |
| City State Zip Code<br>METAIRIE LA 70001   | Amount of Each Receipt this Period<br>2600.00 |  |  |
| FEC ID number of contributing federal political committee.<br>C  | Amount of Each Receipt this Period<br>7800.00 |  |  |
| Name of Employer Occupation<br>HOMEMAKER HOMEMAKER   | Election Cycle-to-Date<br>7800.00             |  |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) Runoff |   |  |  |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. MR. ANTHONY J ZELENKA</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |  |
| Mailing Address 62 MAGNOLIA RIDGE DR  |   | <b>Transaction ID : SA11AI.4907</b>                      |  |
| City State Zip Code<br>MADISONVILLE LA 70447  | Amount of Each Receipt this Period<br>1000.00 |  |  |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>1000.00 |  |  |
| Name of Employer Occupation<br>BERTUCCIS CONTRACTOR   | Election Cycle-to-Date<br>1000.00             |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |  |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. RICHARD E ZUSCHLAG</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>03 / 25 / 2014 |  |
| Mailing Address 108 ASTORIA LOOP  |   | <b>Transaction ID : SA11AI.5075</b>                      |  |
| City State Zip Code<br>LAFAYETTE LA 70508   | Amount of Each Receipt this Period<br>1000.00 |  |  |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>1000.00 |  |  |
| Name of Employer Occupation<br>ACADIAN CEO  | Election Cycle-to-Date<br>1000.00             |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |  |

|   |           |
|---|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 4600.00   |
| <b>TOTAL</b> This Period (last page this line number only)..... | 296112.46 |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 69 OF 94 |
|   | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
ACADIAN AMBULANCE SERVICE INC EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 98000

City LAFAYETTE State LA Zip Code 70509

FEC ID number of contributing federal political committee. **C** C00335570

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2500.00

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

**Transaction ID : SA11C.5076**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 451 FLORIDA STREET  
BANK ONE CENTRE N TOWER 19TH FLOOR

City BATON ROUGE State LA Zip Code 70801

FEC ID number of contributing federal political committee. **C** C00226472

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2500.00

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

**Transaction ID : SA11C.5077**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
CRESCENT RIVER PORT PILOTS ASSOCIATION FEDERAL POLITICAL ACTION COMMITTEE/CRPPA FED PAC

Mailing Address 8712 HWY 23

City BELLE CHASSE State LA Zip Code 70037

FEC ID number of contributing federal political committee. **C** C00221077

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2300.00

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

**Transaction ID : SA11C.5079**

Amount of Each Receipt this Period  
 2300.00

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

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

7300.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 70 OF 94 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**GREAT LAKES DREDGE & DOCK COMPANY**

Mailing Address 2122 YORK ROAD

City OAK BROOK State IL Zip Code 60523

FEC ID number of contributing federal political committee. **C** C00264937

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.5037**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**HNTB HOLDINGS LTD. PAC**

Mailing Address 715 KIRK DRIVE

City KANSAS CITY State MO Zip Code 64105

FEC ID number of contributing federal political committee. **C** C00386029

Name of Employer Occupation

Receipt For: 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 : SA11C.5014**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**JONES WALKER L.L.P.**

Mailing Address 201 ST. CHARLES AVENUE  
49TH FLOOR

City NEW ORLEANS State LA Zip Code 70170

FEC ID number of contributing federal political committee. **C** C00111534

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.5010**

Amount of Each Receipt this Period  
 2500.00

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

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

6000.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 71 OF 94 |
|   | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**LOUISIANA PROPERTY ACQUISITION CO. LLC**

Mailing Address 343 THIRD ST  
SUITE 550

City State Zip Code  
BATON ROUGE LA 70801

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11C.5025**

Amount of Each Receipt this Period  
1000.00

LLC INFORMATION REQUESTED

**B.** Full Name (Last, First, Middle Initial)  
**OCCIDENTAL PETROLEUM CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 10889 WILSHIRE BLVD.

City State Zip Code  
LOS ANGELES CA 90024

FEC ID number of contributing federal political committee. **C** C00083857

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11C.5119**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**OCCIDENTAL PETROLEUM CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 10889 WILSHIRE BLVD.

City State Zip Code  
LOS ANGELES CA 90024

FEC ID number of contributing federal political committee. **C** C00083857

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11C.5120**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 72 OF 94  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
PROFESSIONAL SERVICE INDUSTRIES INC POLITICAL ACTION COMMITTEE (PSI PAC)

Mailing Address 2350 KERNER BLVD SUITE 250

City SAN RAFAEL State CA Zip Code 94901

FEC ID number of contributing federal political committee. **C** C00498527

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.5122**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
SMOKE BEND ASSOCIATES LLC FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 2805 HARVARD AVENUE SUITE 102

City METAIRIE State LA Zip Code 70006

FEC ID number of contributing federal political committee. **C** C00378950

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11C.5078**

Amount of Each Receipt this Period  
 2300.00

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

Mailing Address 1050 THOMAS JEFFERSON STREET, NW

City WASHINGTON State DC Zip Code 20007

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

Name of Employer Occupation

Receipt For: 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 : SA11C.5083**

Amount of Each Receipt this Period  
 1000.00

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

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

5800.00

22100.00



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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 73 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. AMTRAK</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 23 / 2014 |
| Mailing Address 500 MASSACHUSETTS AVE   |  | Amount of Each Disbursement this Period<br>26.00              |
| City<br>WASHINGTON  | State<br>DC  |   |
| Zip Code<br>20002   | Purpose of Disbursement<br>TRAVEL: RAIL  | Transaction ID : SB17.4120<br><br>[MEMO ITEM]                 |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BARNES AND NOBLE BOOKSELLERS</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 08 / 2014 |
| Mailing Address 7707 BLUEBONNET BLVD  |  | Amount of Each Disbursement this Period<br>76.06              |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70810   | Purpose of Disbursement<br>OFFICE SUPPLIES   | Transaction ID : SB17.4122<br><br>[MEMO ITEM]                 |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. CAPITAL GRILLE</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 27 / 2014 |
| Mailing Address 601 PENNSYLVANIA AVE NW   |  | Amount of Each Disbursement this Period<br>331.65             |
| City<br>WASHINGTON  | State<br>DC  |   |
| Zip Code<br>20004   | Purpose of Disbursement<br>MEETING EXPENSE: MEALS  | Transaction ID : SB17.4124<br><br>[MEMO ITEM]                 |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><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 74 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. CCA LOUISIANA</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 20 / 2014 |
| Mailing Address PO BOX 86458  |  | Amount of Each Disbursement this Period<br>300.00             |
| City<br>BATON ROUGE   | State<br>LA  |   |
| Zip Code<br>70879   | Purpose of Disbursement<br>EVENT REGISTRATION FEE  | Transaction ID : SB17.4126                                    |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. CENTER CAFE</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 21 / 2014 |
| Mailing Address 50 MASSACHUSETTS AVE NE   |  | Amount of Each Disbursement this Period<br>26.78              |
| City<br>WASHINGTON  | State<br>DC  |   |
| Zip Code<br>20001   | Purpose of Disbursement<br>TRAVEL: FOOD  | Transaction ID : SB17.4128                                    |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. CHIPOTLE</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 19 / 2014 |
| Mailing Address 1629 CONNECTICUT AVE NW   |  | Amount of Each Disbursement this Period<br>9.50               |
| City<br>WASHINGTON  | State<br>DC  |   |
| Zip Code<br>20036   | Purpose of Disbursement<br>TRAVEL: FOOD  | Transaction ID : SB17.4130                                    |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 9.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 75 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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

Full Name (Last, First, Middle Initial)  
**A. CORNER BAKERY CAFE**

Mailing Address 1328 L STREET NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement TRAVEL: FOOD

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 19 / 2014

Amount of Each Disbursement this Period: 5.47

Transaction ID : SB17.4132

[MEMO ITEM]

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

Mailing Address 1030 DELTA BOULEVARD

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 23 / 2014

Amount of Each Disbursement this Period: 122.00

Transaction ID : SB17.4134

[MEMO ITEM]

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

Mailing Address 1030 DELTA BOULEVARD

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 25 / 2014

Amount of Each Disbursement this Period: 245.00

Transaction ID : SB17.4135

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

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

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 76 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |  |                   |   |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. FRENCH MARKET</b>  |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 05 / 2014 |
| Mailing Address 1008 N PETERS STREET  |  |                   | Amount of Each Disbursement this Period<br>86.41              |
| City<br>NEW ORLEANS   | State<br>LA  | Zip Code<br>70116 |   |
| Purpose of Disbursement<br>TRAVEL: FOOD   |  | Category/<br>Type | <b>Transaction ID : SB17.4137</b><br><br><b>[MEMO ITEM]</b>   |
| Candidate Name  |  |                   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |   |
| State: District:  |  |                   |   |

|  |  |                   |   |
|--|--|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. GARRET GRAVES</b>   |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |
| Mailing Address 1967 OLEANDER STREET   |  |                   | Amount of Each Disbursement this Period<br>6976.33            |
| City<br>BATON ROUGE  | State<br>LA  | Zip Code<br>70806 |   |
| Purpose of Disbursement<br>REIMBURSEMENT SEE MEMO ENTRIES  |  | Category/<br>Type | <b>Transaction ID : SB17.4118</b>                             |
| Candidate Name<br><b>GARRET GRAVES</b>   |  |                   |   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |   |
| State: LA District: 06   |  |                   |   |

|   |  |                   |   |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. HAROLD-BLACK</b>   |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 26 / 2014 |
| Mailing Address 212 7TH STREET SE   |  |                   | Amount of Each Disbursement this Period<br>2520.00            |
| City<br>WASHINGTON  | State<br>DC  | Zip Code<br>20003 |   |
| Purpose of Disbursement<br>FACILITY RENTAL/CATERING   |  | Category/<br>Type | <b>Transaction ID : SB17.4139</b><br><br><b>[MEMO ITEM]</b>   |
| Candidate Name  |  |                   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |   |
| State: District:  |  |                   |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 6976.33 |
| <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 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

**A. HILTON HOTELS**

Full Name (Last, First, Middle Initial)  
Mailing Address 1919 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 23 / 2014

Amount of Each Disbursement this Period: 543.27

Transaction ID : SB17.4141

[MEMO ITEM]

**B. MR. KRISTOPHER S KIRKPATRICK**

Full Name (Last, First, Middle Initial)  
Mailing Address 4318 BROUSSARD ST

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement IN-KIND: FOOD & BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 31 / 2014

Amount of Each Disbursement this Period: 362.32

Transaction ID : SB17.5135

**C. LA MADELEINE**

Full Name (Last, First, Middle Initial)  
Mailing Address 601 S CARROLLTON AVE

City NEW ORLEANS State LA Zip Code 70118

Purpose of Disbursement TRAVEL: FOOD

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 07 / 2014

Amount of Each Disbursement this Period: 7.50

Transaction ID : SB17.4143

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 362.32

**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 78 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. LITTLE VILLAGE</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>02 / 17 / 2014 |
| Mailing Address 14241 AIRLINE HWY   |  | Amount of Each Disbursement this Period<br>321.21        |
| City<br>BATON ROUGE   | State<br>LA  |  |
| Zip Code<br>70817   | Purpose of Disbursement<br>MEETING EXPENSE: MEALS  | Transaction ID : SB17.4145                               |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. NEW ORLEANS METER</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>03 / 13 / 2014 |
| Mailing Address 1300 PERDIDO STREET   |  | Amount of Each Disbursement this Period<br>3.00          |
| City<br>NEW ORLEANS   | State<br>LA  |  |
| Zip Code<br>70112   | Purpose of Disbursement<br>TRAVEL PARKING  | Transaction ID : SB17.4149                               |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. OLD EBBITT</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>02 / 20 / 2014 |
| Mailing Address 675 15TH STREET NW  |  | Amount of Each Disbursement this Period<br>30.25         |
| City<br>WASHINGTON  | State<br>DC  |  |
| Zip Code<br>20005   | Purpose of Disbursement<br>TRAVEL: FOOD  | Transaction ID : SB17.4151                               |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]  |
| State: District:  |  |  |

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

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 79 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |                         |   |
|---|-------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. PARADISE SHOPS</b>   |                         | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 18 / 2014 |
| Mailing Address 2849 ACES FERRY ROAD  |                         | Amount of Each Disbursement this Period<br>5.45               |
| City ATLANTA  | State GA Zip Code 30339 |   |
| Purpose of Disbursement<br>TRAVEL: FOOD   | Candidate Name          | Transaction ID : SB17.4153                                    |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                         |   |
| State: District:  | Category/Type           | [MEMO ITEM]   |

|   |                         |   |
|---|-------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. PARK N' FLY</b>  |                         | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 27 / 2014 |
| Mailing Address 1017 AIRLINE DRIVE  |                         | Amount of Each Disbursement this Period<br>28.62              |
| City KENNER   | State LA Zip Code 70062 |   |
| Purpose of Disbursement<br>TRAVEL: PARKING  | Candidate Name          | Transaction ID : SB17.4155                                    |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                         |   |
| State: District:  | Category/Type           | [MEMO ITEM]   |

|   |                         |   |
|---|-------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. PREMIUM PARKING NEW ORLEANS</b>  |                         | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 19 / 2014 |
| Mailing Address 500 MARIGNY STREET  |                         | Amount of Each Disbursement this Period<br>14.00              |
| City NEW ORLEANS  | State LA Zip Code 70117 |   |
| Purpose of Disbursement<br>TRAVEL: PARKING  | Candidate Name          | Transaction ID : SB17.4157                                    |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                         |   |
| State: District:  | Category/Type           | [MEMO ITEM]   |

|   |      |
|---|------|
| <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 80 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. QUIZNOS</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 23 / 2014 |
| Mailing Address 1001 17TH STREET SUITE 200   |  | Amount of Each Disbursement this Period<br>9.33               |
| City DENVER State CO Zip Code 80202  | Purpose of Disbursement TRAVEL: FOOD   |   |
| Candidate Name   |  | Transaction ID : SB17.4159                                    |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   | Category/Type  | [MEMO ITEM]   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. SCHNEIDERS LIQUORS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 26 / 2014 |
| Mailing Address 300 MASSACHUSETTS AVE NE   |  | Amount of Each Disbursement this Period<br>330.46             |
| City WASHINGTON State DC Zip Code 20002  | Purpose of Disbursement CATERING SERVICES  |   |
| Candidate Name   |  | Transaction ID : SB17.4161                                    |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   | Category/Type  | [MEMO ITEM]   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. SHELL OIL</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 19 / 2014 |
| Mailing Address PO BOX 2463  |  | Amount of Each Disbursement this Period<br>66.77              |
| City HOUSTON State TX Zip Code 77252   | Purpose of Disbursement TRAVEL: FUEL   |   |
| Candidate Name   |  | Transaction ID : SB17.4163                                    |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   | Category/Type  | [MEMO ITEM]   |

|   |      |
|---|------|
| <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:<br>(check only one)  | PAGE 81 OF 94 |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |

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

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. STRIPE</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 24 / 2014                          |
| Mailing Address 3180 18TH ST                                |   | Amount of Each Disbursement this Period<br>301.95<br><b>Transaction ID : SB17.4111</b> |
| City<br>SAN FRANCISCO                                       | State<br>CA   |  |
| Zip Code<br>94110   | Purpose of Disbursement<br>MERCHANT FEES  | Category/<br>Type  |
| Candidate Name  | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014                                      | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  |  |
| <input type="checkbox"/> Other (specify)                    | State: District:  |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. STRIPE</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 25 / 2014                          |
| Mailing Address 3180 18TH ST                                |   | Amount of Each Disbursement this Period<br>151.40<br><b>Transaction ID : SB17.4113</b> |
| City<br>SAN FRANCISCO                                       | State<br>CA   |  |
| Zip Code<br>94110   | Purpose of Disbursement<br>MERCHANT FEES  | Category/<br>Type  |
| Candidate Name  | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014                                      | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  |  |
| <input type="checkbox"/> Other (specify)                    | State: District:  |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. STRIPE</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 26 / 2014                          |
| Mailing Address 3180 18TH ST                                |   | Amount of Each Disbursement this Period<br>151.10<br><b>Transaction ID : SB17.4114</b> |
| City<br>SAN FRANCISCO                                       | State<br>CA   |  |
| Zip Code<br>94110   | Purpose of Disbursement<br>MERCHANT FEES  | Category/<br>Type  |
| Candidate Name  | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014                                      | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  |  |
| <input type="checkbox"/> Other (specify)                    | State: District:  |  |

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|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 604.45 |
| <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:<br>(check only one)  | PAGE 82 OF 94 |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |

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

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. STRIPE</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 28 / 2014                         |
| Mailing Address 3180 18TH ST   |   | Amount of Each Disbursement this Period<br>43.80<br><b>Transaction ID : SB17.4115</b> |
| City<br>SAN FRANCISCO  | State<br>CA   |   |
| Zip Code<br>94110  | Purpose of Disbursement<br>MERCHANT FEES  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. STRIPE</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 29 / 2014                        |
| Mailing Address 3180 18TH ST   |   | Amount of Each Disbursement this Period<br>3.20<br><b>Transaction ID : SB17.4116</b> |
| City<br>SAN FRANCISCO  | State<br>CA   |  |
| Zip Code<br>94110  | Purpose of Disbursement<br>MERCHANT FEES  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. STRIPE</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014                          |
| Mailing Address 3180 18TH ST   |   | Amount of Each Disbursement this Period<br>421.24<br><b>Transaction ID : SB17.4117</b> |
| City<br>SAN FRANCISCO  | State<br>CA   |  |
| Zip Code<br>94110  | Purpose of Disbursement<br>MERCHANT FEES  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 468.24 |
| <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:<br>(check only one)          |                                    | PAGE 83 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TAXI MAGIC</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>02 / 18 / 2014 |
| Mailing Address 5904 RICHMOND HWY   |  | Amount of Each Disbursement this Period<br>22.74         |
| City ALEXANDRIA   | State VA Zip Code 22314  |  |
| Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION  |  | Transaction ID : SB17.4165                               |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]  |
| State: District:  | Category/Type  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. TAXI MAGIC</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>02 / 20 / 2014 |
| Mailing Address 5904 RICHMOND HWY   |  | Amount of Each Disbursement this Period<br>14.15         |
| City ALEXANDRIA   | State VA Zip Code 22314  |  |
| Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION  |  | Transaction ID : SB17.4166                               |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]  |
| State: District:  | Category/Type  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. TAXI MAGIC</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>02 / 20 / 2014 |
| Mailing Address 5904 RICHMOND HWY   |  | Amount of Each Disbursement this Period<br>9.01          |
| City ALEXANDRIA   | State VA Zip Code 22314  |  |
| Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION  |  | Transaction ID : SB17.4167                               |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]  |
| State: District:  | Category/Type  |  |

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

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 84 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. TAXI MAGIC</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 26 / 2014 |
| Mailing Address 5904 RICHMOND HWY   |  | Amount of Each Disbursement this Period<br>18.93              |
| City ALEXANDRIA   | State VA Zip Code 22314  |   |
| Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION  |  | Transaction ID : SB17.4168                                    |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  | Category/Type  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TAXI MAGIC</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 27 / 2014 |
| Mailing Address 5904 RICHMOND HWY   |  | Amount of Each Disbursement this Period<br>8.74               |
| City ALEXANDRIA   | State VA Zip Code 22314  |   |
| Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION  |  | Transaction ID : SB17.4169                                    |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  | Category/Type  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. THE KEEPING ROOM</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 31 / 2014 |
| Mailing Address 7575 JEFFERSON HIGHWAY  |  | Amount of Each Disbursement this Period<br>86.32              |
| City BATON ROUGE  | State LA Zip Code 70806  |   |
| Purpose of Disbursement<br>PRINTING & DESIGN SERVICES   |  | Transaction ID : SB17.4171                                    |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  | Category/Type  |   |

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

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 85 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. US AIRWAYS</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>02 / 18 / 2014 |
| Mailing Address 400 E SKY HARBOUR BOULEVARD  |  | Amount of Each Disbursement this Period<br>213.50        |
| City PHOENIX State AZ Zip Code 85034   | Purpose of Disbursement TRAVEL: AIR  |  |
| Candidate Name   | Category/Type  | Transaction ID : SB17.4173<br><b>[MEMO ITEM]</b>         |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. US AIRWAYS</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>03 / 11 / 2014 |
| Mailing Address 400 E SKY HARBOUR BOULEVARD  |  | Amount of Each Disbursement this Period<br>509.00        |
| City PHOENIX State AZ Zip Code 85034   | Purpose of Disbursement TRAVEL: AIR  |  |
| Candidate Name   | Category/Type  | Transaction ID : SB17.4174<br><b>[MEMO ITEM]</b>         |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. USPS</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>02 / 27 / 2014 |
| Mailing Address 475 LENFANT PLAZA SW   |  | Amount of Each Disbursement this Period<br>146.00        |
| City WASHINGTON State DC Zip Code 20260  | Purpose of Disbursement POSTAGE  |  |
| Candidate Name   | Category/Type  | Transaction ID : SB17.4176<br><b>[MEMO ITEM]</b>         |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

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|---|------|
| <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:<br>(check only one)          | PAGE 86 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. USPS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 10 / 2014 |
| Mailing Address 475 LENFANT PLAZA SW   |  | Amount of Each Disbursement this Period<br>99.85              |
| City WASHINGTON State DC Zip Code 20260  | Purpose of Disbursement POSTAGE  |   |
| Candidate Name   | Category/Type  | Transaction ID : SB17.4177                                    |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District:   |  | [MEMO ITEM]   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. VERIZON WIRELESS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 27 / 2014 |
| Mailing Address PO BOX 4001  |  | Amount of Each Disbursement this Period<br>196.19             |
| City ACWORTH State GA Zip Code 30101   | Purpose of Disbursement MOBILE PHONE EXPENSE   |   |
| Candidate Name   | Category/Type  | Transaction ID : SB17.4179                                    |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District:   |  | [MEMO ITEM]   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. VERIZON WIRELESS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 12 / 2014 |
| Mailing Address PO BOX 4001  |  | Amount of Each Disbursement this Period<br>167.46             |
| City ACWORTH State GA Zip Code 30101   | Purpose of Disbursement MOBILE PHONE EXPENSE   |   |
| Candidate Name   | Category/Type  | Transaction ID : SB17.4180                                    |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District:   |  | [MEMO ITEM]   |

|   |      |
|---|------|
| <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)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 87 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |             |                   |  |  |
|---|-------------|-------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. WALMART</b>  |             |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 06 / 2014  |  |
| Mailing Address 702 SW 8TH STREET   |             |                   | Amount of Each Disbursement this Period<br>81.62   |  |
| City<br>BENTONVILLE   | State<br>AR | Zip Code<br>72716 | Transaction ID : SB17.4182   |  |
| Purpose of Disbursement<br>OFFICE SUPPLIES  |             | Candidate Name    | Category/<br>Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |                   | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:  | District:   | [MEMO ITEM]       |  |  |

|   |             |                   |  |  |
|---|-------------|-------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. WALMART</b>  |             |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 11 / 2014  |  |
| Mailing Address 702 SW 8TH STREET   |             |                   | Amount of Each Disbursement this Period<br>21.41   |  |
| City<br>BENTONVILLE   | State<br>AR | Zip Code<br>72716 | Transaction ID : SB17.4183   |  |
| Purpose of Disbursement<br>OFFICE SUPPLIES  |             | Candidate Name    | Category/<br>Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |                   | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:  | District:   | [MEMO ITEM]       |  |  |

|   |             |                   |  |  |
|---|-------------|-------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. YELLOW CAB CO OF DC, INC.</b>  |             |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 18 / 2014  |  |
| Mailing Address 1636 BLADENSBURG ROAD NE  |             |                   | Amount of Each Disbursement this Period<br>19.73   |  |
| City<br>WASHINGTON  | State<br>DC | Zip Code<br>20002 | Transaction ID : SB17.4185   |  |
| Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION  |             | Candidate Name    | Category/<br>Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |             |                   | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:  | District:   | [MEMO ITEM]       |  |  |

|   |      |
|---|------|
| <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:<br>(check only one)  | PAGE 88 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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

|   |  |                   |   |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. YELLOW CAB CO OF DC, INC.</b>  |  |                   | Date of Disbursement<br>MM / DD / YYYY<br>02 / 19 / 2014    |
| Mailing Address 1636 BLADENSBURG ROAD NE  |  |                   | Amount of Each Disbursement this Period<br>11.93            |
| City<br>WASHINGTON  | State<br>DC  | Zip Code<br>20002 |   |
| Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION  |  | Category/<br>Type | <b>Transaction ID : SB17.4186</b><br><br><b>[MEMO ITEM]</b> |
| Candidate Name  |  |                   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |   |
| State: _____  | District: _____  |                   |   |

|   |  |                   |   |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. YELLOW CAB CO OF DC, INC.</b>  |  |                   | Date of Disbursement<br>MM / DD / YYYY<br>02 / 19 / 2014    |
| Mailing Address 1636 BLADENSBURG ROAD NE  |  |                   | Amount of Each Disbursement this Period<br>9.00             |
| City<br>WASHINGTON  | State<br>DC  | Zip Code<br>20002 |   |
| Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION  |  | Category/<br>Type | <b>Transaction ID : SB17.4187</b><br><br><b>[MEMO ITEM]</b> |
| Candidate Name  |  |                   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |   |
| State: _____  | District: _____  |                   |   |

|   |  |                   |   |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. YELLOW CAB CO OF DC, INC.</b>  |  |                   | Date of Disbursement<br>MM / DD / YYYY<br>02 / 19 / 2014    |
| Mailing Address 1636 BLADENSBURG ROAD NE  |  |                   | Amount of Each Disbursement this Period<br>11.00            |
| City<br>WASHINGTON  | State<br>DC  | Zip Code<br>20002 |   |
| Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION  |  | Category/<br>Type | <b>Transaction ID : SB17.4188</b><br><br><b>[MEMO ITEM]</b> |
| Candidate Name  |  |                   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><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)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 89 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. YELLOW CAB CO OF DC, INC.</b>                                   |  | Date of Disbursement<br>MM / DD / YYYY<br>02 / 19 / 2014 |
| Mailing Address 1636 BLADENSBURG ROAD NE   |  | Amount of Each Disbursement this Period<br>10.86         |
| City WASHINGTON State DC Zip Code 20002  | Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION   |  |
| Candidate Name   |  | Transaction ID : SB17.4189<br><b>[MEMO ITEM]</b>         |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   | Category/Type  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. YELLOW CAB CO OF DC, INC.</b>                                   |  | Date of Disbursement<br>MM / DD / YYYY<br>02 / 20 / 2014 |
| Mailing Address 1636 BLADENSBURG ROAD NE   |  | Amount of Each Disbursement this Period<br>11.00         |
| City WASHINGTON State DC Zip Code 20002  | Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION   |  |
| Candidate Name   |  | Transaction ID : SB17.4190<br><b>[MEMO ITEM]</b>         |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   | Category/Type  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. YELLOW CAB CO OF DC, INC.</b>                                   |  | Date of Disbursement<br>MM / DD / YYYY<br>02 / 20 / 2014 |
| Mailing Address 1636 BLADENSBURG ROAD NE   |  | Amount of Each Disbursement this Period<br>11.60         |
| City WASHINGTON State DC Zip Code 20002  | Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION   |  |
| Candidate Name   |  | Transaction ID : SB17.4191<br><b>[MEMO ITEM]</b>         |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   | Category/Type  |  |

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

**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 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. YELLOW CAB CO OF DC, INC.</b>                                   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 20 / 2014 |
| Mailing Address 1636 BLADENSBURG ROAD NE   |  | Amount of Each Disbursement this Period<br>10.00              |
| City WASHINGTON State DC Zip Code 20002  | Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION  |   |
| Candidate Name   |  | Transaction ID : SB17.4192<br><b>[MEMO ITEM]</b>              |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   | Category/Type  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. YELLOW CAB CO OF DC, INC.</b>                                   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 21 / 2014 |
| Mailing Address 1636 BLADENSBURG ROAD NE   |  | Amount of Each Disbursement this Period<br>16.11              |
| City WASHINGTON State DC Zip Code 20002  | Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION  |   |
| Candidate Name   |  | Transaction ID : SB17.4193<br><b>[MEMO ITEM]</b>              |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   | Category/Type  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. YELLOW CAB CO OF DC, INC.</b>                                   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 21 / 2014 |
| Mailing Address 1636 BLADENSBURG ROAD NE   |  | Amount of Each Disbursement this Period<br>16.75              |
| City WASHINGTON State DC Zip Code 20002  | Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION  |   |
| Candidate Name   |  | Transaction ID : SB17.4194<br><b>[MEMO ITEM]</b>              |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   | Category/Type  |   |

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

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 91 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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

|   |  |                   |   |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. YELLOW CAB CO OF DC, INC.</b>  |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 21 / 2014 |
| Mailing Address 1636 BLADENSBURG ROAD NE  |  |                   | Amount of Each Disbursement this Period<br>11.00              |
| City<br>WASHINGTON  | State<br>DC  | Zip Code<br>20002 |   |
| Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION  |  | Category/<br>Type | <b>Transaction ID : SB17.4195</b><br><br><b>[MEMO ITEM]</b>   |
| Candidate Name  |  |                   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |   |
| State: _____  | District: _____  |                   |   |

|   |  |                   |   |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. YELLOW CAB CO OF DC, INC.</b>  |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 23 / 2014 |
| Mailing Address 1636 BLADENSBURG ROAD NE  |  |                   | Amount of Each Disbursement this Period<br>14.00              |
| City<br>WASHINGTON  | State<br>DC  | Zip Code<br>20002 |   |
| Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION  |  | Category/<br>Type | <b>Transaction ID : SB17.4196</b><br><br><b>[MEMO ITEM]</b>   |
| Candidate Name  |  |                   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |   |
| State: _____  | District: _____  |                   |   |

|   |  |                   |   |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. YELLOW CAB CO OF DC, INC.</b>  |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 25 / 2014 |
| Mailing Address 1636 BLADENSBURG ROAD NE  |  |                   | Amount of Each Disbursement this Period<br>20.15              |
| City<br>WASHINGTON  | State<br>DC  | Zip Code<br>20002 |   |
| Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION  |  | Category/<br>Type | <b>Transaction ID : SB17.4197</b><br><br><b>[MEMO ITEM]</b>   |
| Candidate Name  |  |                   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><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)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 92 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. YELLOW CAB CO OF DC, INC.</b>                                   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 25 / 2014 |
| Mailing Address 1636 BLADENSBURG ROAD NE   |  | Amount of Each Disbursement this Period<br>17.11              |
| City WASHINGTON State DC Zip Code 20002  | Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION   |   |
| Candidate Name   |  | Transaction ID : SB17.4198<br><b>[MEMO ITEM]</b>              |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   | Category/Type  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. YELLOW CAB CO OF DC, INC.</b>                                   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 25 / 2014 |
| Mailing Address 1636 BLADENSBURG ROAD NE   |  | Amount of Each Disbursement this Period<br>13.22              |
| City WASHINGTON State DC Zip Code 20002  | Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION   |   |
| Candidate Name   |  | Transaction ID : SB17.4199<br><b>[MEMO ITEM]</b>              |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   | Category/Type  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. YELLOW CAB CO OF DC, INC.</b>                                   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 25 / 2014 |
| Mailing Address 1636 BLADENSBURG ROAD NE   |  | Amount of Each Disbursement this Period<br>8.01               |
| City WASHINGTON State DC Zip Code 20002  | Purpose of Disbursement<br>TRAVEL: GROUND TRANSPORTATION   |   |
| Candidate Name   |  | Transaction ID : SB17.4200<br><b>[MEMO ITEM]</b>              |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   | Category/Type  |   |

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

**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 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. YELLOW CAB CO OF DC, INC.</b>                                   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 26 / 2014 |
| Mailing Address 1636 BLADENSBURG ROAD NE   |  | Amount of Each Disbursement this Period<br>12.00              |
| City WASHINGTON State DC Zip Code 20002  | Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION  |   |
| Candidate Name   |  | Transaction ID : SB17.4201<br><b>[MEMO ITEM]</b>              |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   | Category/Type  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. YELLOW CAB CO OF DC, INC.</b>                                   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 26 / 2014 |
| Mailing Address 1636 BLADENSBURG ROAD NE   |  | Amount of Each Disbursement this Period<br>11.00              |
| City WASHINGTON State DC Zip Code 20002  | Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION  |   |
| Candidate Name   |  | Transaction ID : SB17.4202<br><b>[MEMO ITEM]</b>              |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   | Category/Type  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. YELLOW CAB CO OF DC, INC.</b>                                   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 27 / 2014 |
| Mailing Address 1636 BLADENSBURG ROAD NE   |  | Amount of Each Disbursement this Period<br>20.35              |
| City WASHINGTON State DC Zip Code 20002  | Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION  |   |
| Candidate Name   |  | Transaction ID : SB17.4203<br><b>[MEMO ITEM]</b>              |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   | Category/Type  |   |

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

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 94 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ZAYTINYA</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 20 / 2014 |
| Mailing Address 701 9TH STREET NW  |  | Amount of Each Disbursement this Period<br>17.85              |
| City WASHINGTON State DC Zip Code 20001  | Purpose of Disbursement TRAVEL: FOOD   |   |
| Candidate Name   | Category/Type  | Transaction ID : SB17.4205                                    |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District:   |  | <b>[MEMO ITEM]</b>  |

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

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

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00    |
| <b>TOTAL</b> This Period (last page this line number only)..... | 8411.34 |