

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

DR BRIAN BABIN FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 159

Check if different than previously reported. (ACC)

WOODVILLE

TX

75979

2. **FEC IDENTIFICATION NUMBER** ▼

C C00553859

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

TX

36

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Sue Cleveland

Signature of Treasurer Sue Cleveland

[Electronically Filed]

Date

/ /

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

DR BRIAN BABIN FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	225045.70	869451.00
(b) Total Contribution Refunds (from Line 20(d))	11000.00	13000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	214045.70	856451.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	107869.30	743550.27
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	107869.30	743550.27
8. Cash on Hand at Close of Reporting Period (from Line 27).....	180400.73	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	67000.00	

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

DR BRIAN BABIN FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	74250.00	523039.08
(ii) Unitemized.....	3495.70	46761.92
(iii) TOTAL of contributions from individuals ▶	77745.70	569801.00
(b) Political Party Committees.....	0.00	15250.00
(c) Other Political Committees (such as PACs).....	147300.00	281175.00
(d) The Candidate.....	0.00	3225.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	225045.70	869451.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	75000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	75000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	500.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	225045.70	944951.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	107869.30	743550.27
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	8000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	8000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1500.00	2000.00
(b) Political Party Committees.....	9500.00	9500.00
(c) Other Political Committees (such as PACs).....	0.00	1500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	11000.00	13000.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	118869.30	764550.27

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	74224.33
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	225045.70
25. SUBTOTAL (add Line 23 and Line 24).....	299270.03
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	118869.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	180400.73

**SCHEDULE A (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 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Gary Angel

Mailing Address 5106 Bayou Blvd

City Baytown	State TX	Zip Code 77521
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FEC ID number of contributing federal political committee. **C**

Name of Employer Angel Construction	Occupation Construction
--	----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2014

Transaction ID : SA11AI.7619

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Mr. Greg Angel

Mailing Address PO Box 570

City Baytown	State TX	Zip Code 77522-0570
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FEC ID number of contributing federal political committee. **C**

Name of Employer Angel Construction	Occupation Construction
--	----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2014

Transaction ID : SA11AI.7620

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Luanne Angel

Mailing Address PO Box 570

City Baytown	State TX	Zip Code 77522-0570
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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
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2014

Transaction ID : SA11AI.7621

Amount of Each Receipt this Period
2500.00

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

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

7500.00

**SCHEDULE A (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 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Tanya Angel

Mailing Address 5106 Bayou Blvd

City State Zip Code
Baytown TX 77521

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
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2014

Transaction ID : SA11AI.7622

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Mr. Marcus Carl Barber Sr.

Mailing Address 415 W Chelsea Pl

City State Zip Code
El Lago TX 77586

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

Name of Employer Occupation
CRB Construction Construction

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
-2400.00

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

Transaction ID : SA11AI.7783

Amount of Each Receipt this Period
-2400.00

Reattribute:

C. Full Name (Last, First, Middle Initial)
Mr. Marcus Carl Barber Sr.

Mailing Address 415 W Chelsea Pl

City State Zip Code
El Lago TX 77586

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

Name of Employer Occupation
CRB Construction Construction

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2014

Transaction ID : SA11AI.7614

Amount of Each Receipt this Period
5000.00

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 7 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robin Barber

Mailing Address 415 W Chelsea Place

City State Zip Code
El Lago TX 77586

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
2400.00

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

Transaction ID : SA11AI.7784

Amount of Each Receipt this Period
2400.00

Reattribute: Marcus Barber

B. Full Name (Last, First, Middle Initial)
Mr. Maurice L. Barclay

Mailing Address 1409 Minchen

City State Zip Code
Deer Park TX 77536

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

Name of Employer Occupation
Allied Insurance Agency Insurance

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
 09 / 24 / 2014

Transaction ID : SA11AI.7662

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard A. Bernstein

Mailing Address 18 Rockledge Rd

City State Zip Code
Rye NY 10580

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

Name of Employer Occupation
P & E Properties 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
 09 / 22 / 2014

Transaction ID : SA11AI.7639

Amount of Each Receipt this Period
500.00

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

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

3150.00

**SCHEDULE A (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 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. William C. Bodie

Mailing Address 4905 Chevy Chase Blvd

City State Zip Code
Chevy Chase MD 20815-5337

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Parsons Corporation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7599

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
Mr. David L. Bole

Mailing Address 1265 Ridgewood Pl

City State Zip Code
Houston TX 77055-5083

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7640

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
Mrs. Linda L. Boone

Mailing Address 1930 CR 2570

City State Zip Code
Colmesneil TX 75938

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7611

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 9 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Terry Brotherton

Mailing Address 6807 Cedar Point Dr

City Pasadena State TX Zip Code 77505

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

Name of Employer Self Employed Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.7663

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Terry R. Brown

Mailing Address 26002 Budde Rd

City The Woodlands State TX Zip Code 77380

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

Name of Employer Self-Employed Occupation Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7683

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Ms. Lou Ann Cloy

Mailing Address PO Box 280

City Village Mills State TX Zip Code 77663

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

Name of Employer Tyler County Occupation Assistant DA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.7679

Amount of Each Receipt this Period
250.00

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 10 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Stephen P. Cote

Mailing Address 3803 Uruguay Dr

City Pasadena State TX Zip Code 77504

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

Name of Employer Brady Chapman Holland & Associates Occupation Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.7665

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas D. Coughlen

Mailing Address 4611 Country Club View

City Baytown State TX Zip Code 77521

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2014

Transaction ID : SA11AI.7615

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Lezlie R. Cuellar

Mailing Address 40 Doe Run Dr

City The Woodlands State TX Zip Code 77380

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
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7685

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. James D. Dannenbaum		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014	
Mailing Address 3100 W Alabama St		Transaction ID : SA11AI.7643	
City Houston	State TX	Zip Code 77098	Amount of Each Receipt this Period _____ 2600.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Engineer	Occupation Dannenbaum Engineering Corp		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2600.00		

Full Name (Last, First, Middle Initial) B. Mr. Mark Denman		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014	
Mailing Address 2025 Harbour Dr		Transaction ID : SA11AI.7680	
City Nassau Bay	State TX	Zip Code 77058	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		C	
Name of Employer RiceTec Inc.	Occupation COO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 600.00		

Full Name (Last, First, Middle Initial) C. Daniel P Ellis		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 305 W Mill		Transaction ID : SA11AI.7686	
City Livingston	State TX	Zip Code 77351	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 600.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 2950.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. Tilman J. Fertitta		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 1510 West Loop South		Transaction ID : SA11AI.7632	
City Houston	State TX	Zip Code 77027	Amount of Each Receipt this Period _____ 2500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Landry's Inc.	Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2500.00		

Full Name (Last, First, Middle Initial) B. Mr. Stuart Goldman		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014	
Mailing Address 4007 W Main St		Transaction ID : SA11AI.7644	
City Houston	State TX	Zip Code 77027	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Suncor Companies	Occupation Real estate investments		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) C. Mr. Brad L. Hance		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014	
Mailing Address 6222 Sands Dr		Transaction ID : SA11AI.7646	
City Pasadena	State TX	Zip Code 77505-3863	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer MECO Inc.	Occupation President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Stephen Hart

Mailing Address 40226 N 65th St

City State Zip Code
Cave Creek AZ 85331

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

Name of Employer Occupation
Lewis Roca Rothgerber LLP 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
 07 / 23 / 2014

Transaction ID : SA11AI.7598

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Rodney J Hebert

Mailing Address 2204 S Wheeler St

City State Zip Code
Jasper TX 75951-5616

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
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7687

Amount of Each Receipt this Period
50.00

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

Mailing Address 10505 Katy Fwy

City State Zip Code
Houston TX 77024

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

Name of Employer Occupation
Taste of Texas Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.7647

Amount of Each Receipt this Period
5200.00

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

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

6250.00

**SCHEDULE A (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 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Edd C. Hendee

Mailing Address 10505 Katy Fwy

City Houston State TX Zip Code 77024

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

Name of Employer Taste of Texas Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5700.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.7786

Amount of Each Receipt this Period
-2600.00

Reattribute:

B. Full Name (Last, First, Middle Initial)
Mrs. Nina Hendee

Mailing Address 10505 Katy Fwy

City Houston State TX Zip Code 77024-1001

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

Name of Employer Taste of Texas Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.7787

Amount of Each Receipt this Period
2600.00

Reattribute: Edd Hendee

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

Mailing Address 8709 Burning Tree Rd

City Bethesda State MD Zip Code 20817

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

Name of Employer American Defense International, Inc. Occupation Government Affairs Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.7610

Amount of Each Receipt this Period
250.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. Van D. Hipp Jr.		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2014	
Mailing Address 809 N Quaker Ln		Transaction ID : SA11AI.7612	
City Alexandria	State VA	Zip Code 22302	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Government Affairs	Occupation American Defense International		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Mr. Laurence E. Hirsch		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2014	
Mailing Address 3811 Turtle Creek Blvd Ste 250		Transaction ID : SA11AI.7613	
City Dallas	State TX	Zip Code 75219-4487	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Highlander Partners	Occupation Management		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) C. Mr. Niels C. Holch		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2014	
Mailing Address 3308 Hidden River View Rd		Transaction ID : SA11AI.7602	
City Annapolis	State MD	Zip Code 21403	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Holch & Erickson	Occupation Partner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	3850.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms. Gail Husband

Mailing Address 608 Nellius

City Woodville State TX Zip Code 75979

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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.7681

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Col. Victor Janushkowsky

Mailing Address 311 Luke Ave

City Barksdale AFB State LA Zip Code 71110

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

Name of Employer Booz Allen Hamilton Occupation Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : SA11AI.7603

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Gloria Jones

Mailing Address 1106 S College Ave

City Cleveland State TX Zip Code 77327

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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11AI.7637

Amount of Each Receipt this Period
1000.00

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 17 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dennis W Kavanagh

Mailing Address 49 Mayfield Rd

City Groton State MA Zip Code 01450

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

Name of Employer Raytheon Company Occupation Program Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11AI.7777

Amount of Each Receipt this Period
50.00

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

Mailing Address 3969 Lake Star Dr

City League City State TX Zip Code 77573

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

Name of Employer Logyx Occupation Aerospace Engineer

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
 09 / 24 / 2014

Transaction ID : SA11AI.7668

Amount of Each Receipt this Period
250.00

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

Mailing Address 30 S. Tranquil Path

City The Woodlands State TX Zip Code 77380

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

Name of Employer Housewife Occupation Housewife

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **7800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.7790

Amount of Each Receipt this Period
2600.00

Reattribute: Robert Marling

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

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

2900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert E. Marling

Mailing Address 30 S. Tranquil Path

City State Zip Code
The Woodlands TX 77380

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

Name of Employer Occupation
Woodforest Bank CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11A1.7648

Amount of Each Receipt this Period
5200.00

B. Full Name (Last, First, Middle Initial)
Robert E. Marling

Mailing Address 30 S. Tranquil Path

City State Zip Code
The Woodlands TX 77380

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

Name of Employer Occupation
Woodforest Bank CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7800.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11A1.7789

Amount of Each Receipt this Period
-2600.00

Reattribute:

C. Full Name (Last, First, Middle Initial)
Mr. Edward Earl Martin Jr.

Mailing Address 12309 Muhly Cove

City State Zip Code
Austin TX 78736

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

Name of Employer Occupation
Self Employed Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11A1.7625

Amount of Each Receipt this Period
1000.00

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 19 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Roy O. Martin III

Mailing Address PO Box 1110

City State Zip Code
Alexandria LA 71309

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

Name of Employer Occupation
Roy O Martin, LLC Business

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.7631

Amount of Each Receipt this Period
 1000.00

Questioned

B. Full Name (Last, First, Middle Initial)
Mr. Gordon McKinley Jr.

Mailing Address 8440 Burnet Rd Ste 148

City State Zip Code
Austin TX 78757

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

Name of Employer Occupation
Self Employed Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7688

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Ben F. Meador Jr.

Mailing Address 4012 Paraguay

City State Zip Code
Pasadena TX 77504

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

Name of Employer Occupation
Meador Staffing President / CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.7669

Amount of Each Receipt this Period
 2000.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Roy D. Mease

Mailing Address 4008 Vista Rd Ste 101A

City Pasadena State TX Zip Code 77504

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.7670

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Larry D. Meyers

Mailing Address 412 1st St SE

City Washington State DC Zip Code 20003

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

Name of Employer Meyers & Associates LLC Occupation Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
620.70

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11AI.7780

Amount of Each Receipt this Period
450.00

In-kind - Catering expense

C. Full Name (Last, First, Middle Initial)
Mr. Larry D. Meyers

Mailing Address 412 1st St SE

City Washington State DC Zip Code 20003

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

Name of Employer Meyers & Associates LLC Occupation Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1620.70

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : SA11AI.7591

Amount of Each Receipt this Period
1000.00

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Jake Mitchell

Mailing Address 28106 Kudzu Dr

City Spring State TX Zip Code 77386

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

Name of Employer Ozias Oilfield Solutions Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7689

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Mr. Patrick J. Mitchell

Mailing Address 444 N Capitol St NW Ste 840

City Washington State DC Zip Code 20001

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

Name of Employer Strategic Impact Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : SA11AI.7604

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. A. Rose Moon

Mailing Address 310 Del Monte Dr

City Friendswood State TX Zip Code 77546

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
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.7671

Amount of Each Receipt this Period
2500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. John H. Moon Jr.

Mailing Address 6822 Kemper Dr

City Pasadena State TX Zip Code 77505

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

Name of Employer Moon Credit Corp Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11A1.7672

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mark M. Moore

Mailing Address P.O. Box 671

City Woodville State TX Zip Code 75979

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

Name of Employer Cypress Creek Cattle, Inc Occupation Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014

Transaction ID : SA11A1.7595

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
Mr. William L. H. Morgan Jr.

Mailing Address 12815 Gulf Fwy

City Houston State TX Zip Code 77034-4807

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11A1.7673

Amount of Each Receipt this Period
250.00

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

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

850.00

**SCHEDULE A (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 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Darrell Morrison

Mailing Address 4226 Armand View Dr

City Pasadena State TX Zip Code 77505

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

Name of Employer HTS Inc. Consultants Occupation 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
 09 / 24 / 2014

Transaction ID : SA11AI.7674

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. George A. Neimann

Mailing Address 13 Cecil Dr

City Woodville State TX Zip Code 75979

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

Name of Employer Self-Employed Occupation Farming/Petroleum industry

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11AI.7638

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. William S. Nichols

Mailing Address 9700 Richmond #255

City Houston State TX Zip Code 77042

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

Name of Employer Suncor Companies Occupation Real Estate Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.7649

Amount of Each Receipt this Period
300.00

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

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

850.00

**SCHEDULE A (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 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms. Jan Ott

Mailing Address 7903 Alamar

City Houston State TX Zip Code 77095

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11A1.7650

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Bill Pattillo

Mailing Address PO Box 580552

City Houston State TX Zip Code 77258-0552

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

Name of Employer Self Employed Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11A1.7651

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. James E. Pederson

Mailing Address 2800 N Central Ave Ste 1500

City Phoenix State AZ Zip Code 85004

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

Name of Employer Pederson Group Inc. Occupation Real Estate Development

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : SA11A1.7606

Amount of Each Receipt this Period
2600.00

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

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

3100.00

**SCHEDULE A (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 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mrs. Roberta M. Pederson		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2014	
Mailing Address 2800 N Central Ave Ste 1500		Transaction ID : SA11AI.7607	
City State Zip Code Phoenix AZ 85004	Amount of Each Receipt this Period 2600.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Homemaker Homemaker		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) B. Alan A. Phelps		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 2040 N. Loop 336 West Ste 302		Transaction ID : SA11AI.7691	
City State Zip Code Conroe TX 77304	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Self-Employed Insurance Agent		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. Mr. Calvin Powitzky		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014	
Mailing Address 701 Victory Terrace Ln		Transaction ID : SA11AI.7652	
City State Zip Code Friendswood TX 77546	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation IBI Group Architects Architect		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	3050.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms. Brenda Pullen

Mailing Address 14823 Alderwick Dr

City State Zip Code
Sugar Land TX 77498-1021

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 M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.7653

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. R. G. Quinn

Mailing Address PO Box 5637

City State Zip Code
Beaumont TX 77726-5637

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

Name of Employer Occupation
Self Employed Investments

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.7661

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Gloria G. Roemer

Mailing Address P.O. Box 56

City State Zip Code
Stowell TX 77661

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
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11AI.7635

Amount of Each Receipt this Period
100.00

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

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

2600.00

**SCHEDULE A (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 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Ms. Regina J. Rogers
 Full Name (Last, First, Middle Initial)
 Mailing Address 3195 Dowlen Rd #101-416
 City State Zip Code
 Beaumont TX 77706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Employed 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
 09 / 30 / 2014
Transaction ID : SA11AI.7692
 Amount of Each Receipt this Period
 1000.00

B. Mr. John Savercool
 Full Name (Last, First, Middle Initial)
 Mailing Address 13301 Banbury Pl
 City State Zip Code
 Silver Springs MD 20904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UBS Americas Managing Director
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.7630
 Amount of Each Receipt this Period
 500.00

C. Mr. Bob Shults
 Full Name (Last, First, Middle Initial)
 Mailing Address 13115 Boheme
 City State Zip Code
 Houston TX 77079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Lugenbuhl, Wheaton, Peck, Rankin & Hub 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
 09 / 22 / 2014
Transaction ID : SA11AI.7654
 Amount of Each Receipt this Period
 250.00

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

1750.00

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

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

FOR LINE NUMBER: PAGE 28 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Duncan W. Stewart

Mailing Address 1740 South Blvd

City Houston State TX Zip Code 77098

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

Name of Employer Texas Citizens Bank N.A. Occupation 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
 09 / 24 / 2014

Transaction ID : SA11AI.7675

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Juanita Turk

Mailing Address 1008 Pinewood Blvd

City Sour Lake State TX Zip Code 77659

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

Name of Employer Re-Max Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.7657

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert A. Turner

Mailing Address 4710 Creekbend Dr

City Houston State TX Zip Code 77035-4906

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

Name of Employer BEST EFFORTS Occupation BEST EFFORTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

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

Transaction ID : SA11AI.7629

Amount of Each Receipt this Period
200.00

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Walter Umphrey

Mailing Address PO Box 4905

City State Zip Code
Beaumont TX 77704

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

Name of Employer Occupation
Self Employed 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
 08 / 20 / 2014

Transaction ID : SA11AI.7624

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
United Urban Indian League

Mailing Address 455 Captial Mall

City State Zip Code
Sacramento CA 95814

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : SA11AI.7608

Amount of Each Receipt this Period
2600.00

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

Mailing Address 1004 Sugardale Ct

City State Zip Code
Sugar Land TX 77498

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

Name of Employer Occupation
Wall 2 Wall Insurance Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.7658

Amount of Each Receipt this Period
250.00

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 30 OF 100
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Arlo F. Weltge

Mailing Address 5213 Valerie

City State Zip Code
Bellaire TX 77401

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

Name of Employer Occupation
Self Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.7659

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Marsha K. Williams

Mailing Address 8 Hornsilver Pl

City State Zip Code
The Woodlands TX 77381

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

Name of Employer Occupation
Woodforest Financial Services Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.7695

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Willis Brothers Energy, LLC

Mailing Address 303 N Jackson

City State Zip Code
Luling TX 77351

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.7660

Amount of Each Receipt this Period
500.00

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

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

1000.00

74250.00

**SCHEDULE A (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 100
	<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)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial)
ACTION COMMITTEE FOR RURAL ELECTRIFICATION. (ACRE) NATIONAL RURAL ELECTRIC COOPERATIVE

A. Mailing Address 4301 WILSON BOULEVARD

City State Zip Code
ARLINGTON VA 22203

FEC ID number of contributing federal political committee. **C** C00002972

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
 09 / 30 / 2014

Transaction ID : SA11C.7767

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Alabama-Coushatta Tribe

Mailing Address 571 State Park Rd 56

City State Zip Code
Livingston TX 77351

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

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
 07 / 28 / 2014

Transaction ID : SA11C.7696

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 101 NORTH 3RD STREET

City State Zip Code
MOORHEAD MN 56560

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

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
 09 / 16 / 2014

Transaction ID : SA11C.7735

Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional)..... 8500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 25 MASSACHUSETTS AVE, NW
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7769

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1505 PRINCE STREET
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00024968

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
 09 / 30 / 2014

Transaction ID : SA11C.7771

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN OSTEOPATHIC INFORMATION ASSOCIATION - OSTEOPATHIC POLITICAL ACTION COMMITTEE

Mailing Address 1090 VERMONT AVE., NW
SUITE 500

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00113803

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
 08 / 18 / 2014

Transaction ID : SA11C.7723

Amount of Each Receipt this Period
1000.00

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

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

8500.00

**SCHEDULE A (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 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN SUGARBEET GROWERS ASSOCIATION PAC

Mailing Address 1156 15TH STREET NW
SUITE 1101

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00167684**

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
 09 / 26 / 2014

Transaction ID : SA11C.7759

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ARKEMA POLITICAL ACTION COMMITTEE

Mailing Address 900 FIRST AVE

City KING OF PRUSSIA State PA Zip Code 19406

FEC ID number of contributing federal political committee. **C C00182980**

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
 07 / 28 / 2014

Transaction ID : SA11C.7707

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTION COMMITTEE (ABC PAC)

Mailing Address 440 FIRST STREET NW
SUITE 200

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00010421**

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
 08 / 13 / 2014

Transaction ID : SA11C.7721

Amount of Each Receipt this Period
2500.00

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 34 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address **208 S. AKARD STREET
SUITE 2701**

City State Zip Code
DALLAS TX 75202

FEC ID number of contributing federal political committee. **C C00109017**

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
07 28 2014

Transaction ID : SA11C.7708

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)

Mailing Address **P.O. BOX 961039**

City State Zip Code
FORT WORTH TX 76161

FEC ID number of contributing federal political committee. **C C00235739**

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
09 22 2014

Transaction ID : SA11C.7747

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
CHEVRON EMPLOYEES POLITICAL ACTION COMMITTEE - CHEVRON CORPORATION

Mailing Address **6101 BOLLINGER CANYON ROAD
ROOM 3418**

City State Zip Code
SAN RAMON CA 94583

FEC ID number of contributing federal political committee. **C C00035006**

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
08 18 2014

Transaction ID : SA11C.7724

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... **5000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
COLLINS FOR CONGRESS

Mailing Address PO BOX 1295

City Gainesville State GA Zip Code 30503

FEC ID number of contributing federal political committee. **C** C00502039

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11C.7740

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Conservative Citizens Club PAC

Mailing Address PO Box 3487

City Pasadena State TX Zip Code 77501

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

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
 09 / 24 / 2014

Transaction ID : SA11C.7701

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
Constable Bill Bailey, Office Account

Mailing Address 4522 Young St

City Pasadena State TX Zip Code 77504

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

Name of Employer Occupation
 Retired Constable

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11C.7702

Amount of Each Receipt this Period
 250.00

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

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

3250.00

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

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

FOR LINE NUMBER: PAGE 36 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC

Mailing Address 316 PENNSYLVANIA AVE SE
SUITE 401

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C C00503680**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11C.7748

Amount of Each Receipt this Period
1000.00

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

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

City State Zip Code
WASHINGTON DC 20004

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.7772

Amount of Each Receipt this Period
1000.00

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

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

City State Zip Code
WASHINGTON DC 20004

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.7773

Amount of Each Receipt this Period
1500.00

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 37 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CYBERONICS INC FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 100 CYBERONICS BOULEVARD

City HOUSTON State TX Zip Code 77058

FEC ID number of contributing federal political committee. **C** C00481291

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
 09 / 22 / 2014

Transaction ID : SA11C.7749

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
EAGLE FORUM PAC

Mailing Address P.O. BOX 618

City ALTON State IL Zip Code 62002

FEC ID number of contributing federal political committee. **C** C00103937

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
 09 / 26 / 2014

Transaction ID : SA11C.7760

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC)

Mailing Address PO BOX 20503

City INDIANAPOLIS State IN Zip Code 46220

FEC ID number of contributing federal political committee. **C** C00121368

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
 07 / 21 / 2014

Transaction ID : SA11C.7706

Amount of Each Receipt this Period
 2500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FREEDOM PROJECT; THE

Mailing Address **320 1ST STREET SE**

City **WASHINGTON** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00305805**

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
09 / 22 / 2014

Transaction ID : SA11C.7753

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)

Mailing Address **2941 FAIRVIEW PARK DR.
SUITE 100**

City **FALLS CHURCH** State **VA** Zip Code **22042**

FEC ID number of contributing federal political committee. **C C00078451**

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
08 / 11 / 2014

Transaction ID : SA11C.7714

Amount of Each Receipt this Period

1000.00

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

Mailing Address **801 17TH ST NW 10TH FLOOR**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00035691**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 26 / 2014

Transaction ID : SA11C.7727

Amount of Each Receipt this Period

2500.00

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

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

8500.00

**SCHEDULE A (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 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Houston Pilots

Mailing Address 203 Deerwood Glen Dr

City State Zip Code
Deer Park TX 77536

FEC ID number of contributing federal political committee. **C** C00266387

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
09 / 29 / 2014

Transaction ID : SA11C.7763

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE (IP-PAC)

Mailing Address 1101 PENNSYLVANIA AVENUE NW
SUITE 200

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00034405

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
08 / 11 / 2014

Transaction ID : SA11C.7715

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
IPAA WILDCATTERS FUND

Mailing Address 1201 15TH STREET, NW
SUITE 300

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00246306

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
08 / 11 / 2014

Transaction ID : SA11C.7716

Amount of Each Receipt this Period
2000.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOBS, ECONOMY AND BUDGET FUND (JEB FUND)

Mailing Address PO BOX 30844

City State Zip Code
BETHESDA MD 20824

FEC ID number of contributing federal political committee. **C** C00420695

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
 08 / 11 / 2014

Transaction ID : SA11C.7717

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Johnny Isbell Campaign Account

Mailing Address PO Box 177

City State Zip Code
Pasadena TX 77501

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
 09 / 26 / 2014

Transaction ID : SA11C.7704

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address 600 14TH STREET, NW
SUITE 800

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00236489

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
 09 / 22 / 2014

Transaction ID : SA11C.7750

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 41 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LEAD YOUR NATION NOW PAC (LYNN PAC)

Mailing Address P.O. BOX 1872

City State Zip Code
TOPEKA KS 66601

FEC ID number of contributing federal political committee. **C C00491043**

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
 09 / 29 / 2014

Transaction ID : SA11C.7764

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
LIBERTY PROJECT

Mailing Address PO BOX 53866

City State Zip Code
LUBBOCK TX 79453

FEC ID number of contributing federal political committee. **C C00446625**

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
 07 / 28 / 2014

Transaction ID : SA11C.7709

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City State Zip Code
ARLINGTON VA 22202

FEC ID number of contributing federal political committee. **C C00303024**

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
 08 / 11 / 2014

Transaction ID : SA11C.7718

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: (check only one)	PAGE 42 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address **2121 CRYSTAL DRIVE
SUITE 100**

City State Zip Code
ARLINGTON VA 22202

FEC ID number of contributing federal political committee. **C C00303024**

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
09 29 2014

Transaction ID : SA11C.7765

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
LONE STAR LEADERSHIP PAC

Mailing Address **PO BOX 30844**

City State Zip Code
BETHESDA MD 20824

FEC ID number of contributing federal political committee. **C C00415208**

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
09 16 2014

Transaction ID : SA11C.7737

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
LYONDELL CHEMICAL COMPANY PAC

Mailing Address **1221 MCKINNEY STREET
SUITE 700**

City State Zip Code
HOUSTON TX 77010

FEC ID number of contributing federal political committee. **C C00306175**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 28 2014

Transaction ID : SA11C.7710

Amount of Each Receipt this Period
1500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MAKING AMERICA PROSPEROUS PAC

Mailing Address **PO BOX 2485**

City **SPRINGFIELD** State **VA** Zip Code **22152**

FEC ID number of contributing federal political committee. **C C00445379**

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
08 / 19 / 2014

Transaction ID : SA11C.7726

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
MARATHON PETROLEUM CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE (MPAC)

Mailing Address **P.O. BOX 75000**
MC2250

City **DETROIT** State **MI** Zip Code **48275**

FEC ID number of contributing federal political committee. **C C00496307**

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
07 / 28 / 2014

Transaction ID : SA11C.7711

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
MCCAUL FOR CONGRESS, INC

Mailing Address **815-A BRAZOS STREET**
PMB 230

City **AUSTIN** State **TX** Zip Code **78701**

FEC ID number of contributing federal political committee. **C C00392688**

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
08 / 11 / 2014

Transaction ID : SA11C.7719

Amount of Each Receipt this Period
1000.00

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

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

5500.00

**SCHEDULE A (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 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MEADWESTVACO CORP. POLITICAL ACTION COMMITTEE

Mailing Address 501 SOUTH 5TH STREET

City	State	Zip Code
RICHMOND	VA	23219

FEC ID number of contributing federal political committee. **C** C00065987

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
 09 / 25 / 2014

Transaction ID : SA11C.7757

Amount of Each Receipt this Period
 _____ 2000.00

B. Full Name (Last, First, Middle Initial)
MICHIGAN SUGAR COMPANY GROWERS POLITICAL ACTION COMMITTEE

Mailing Address 2600 SOUTH EUCLID AVENUE

City	State	Zip Code
BAY CITY	MI	48706

FEC ID number of contributing federal political committee. **C** C00384354

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
 09 / 16 / 2014

Transaction ID : SA11C.7738

Amount of Each Receipt this Period
 _____ 2000.00

C. Full Name (Last, First, Middle Initial)
MORE CONSERVATIVES PAC (MCPAC)

Mailing Address 228 S WASHINGTON ST STE 115

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing federal political committee. **C** C00540187

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
 09 / 19 / 2014

Transaction ID : SA11C.7741

Amount of Each Receipt this Period
 _____ 1000.00

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

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

_____ 5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF HOME BUILDERS

Mailing Address 1201 15TH ST NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C30001366

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11C.7730

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
National Association of Realtors PAC

Mailing Address 430 N Michigan Ave

City State Zip Code
Chicago IL 60611

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 27 / 2014

Transaction ID : SA11C.7729

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 KING STREET
SUITE 600

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00144766

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
09 / 22 / 2014

Transaction ID : SA11C.7751

Amount of Each Receipt this Period
2500.00

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

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

12500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL CATTLEMEN'S BEEF ASSOCIATION POLITICAL ACTION COMMITTEE (NCBA-PAC)

Mailing Address 9110 EAST NICHOLS AVENUE

City State Zip Code
CENTENNIAL CO 80112

FEC ID number of contributing federal political committee. **C** C00028787

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
 08 / 26 / 2014

Transaction ID : SA11C.7728

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL COTTON COUNCIL COMMITTEE FOR THE ADVANCEMENT OF COTTON

Mailing Address P.O. BOX 2995

City State Zip Code
CORDOVA TN 38088

FEC ID number of contributing federal political committee. **C** C00023028

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
 09 / 16 / 2014

Transaction ID : SA11C.7736

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE

Mailing Address 1125 EXECUTIVE CIRCLE

City State Zip Code
IRVING TX 75038

FEC ID number of contributing federal political committee. **C** C00140061

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
 08 / 18 / 2014

Transaction ID : SA11C.7725

Amount of Each Receipt this Period
2500.00

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 47 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE

Mailing Address 1125 EXECUTIVE CIRCLE

City IRVING State TX Zip Code 75038

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

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
 09 / 29 / 2014

Transaction ID : SA11C.7766

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00075820

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
 09 / 19 / 2014

Transaction ID : SA11C.7742

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX State VA Zip Code 22030

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11C.7752

Amount of Each Receipt this Period
1000.00

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: PAGE 48 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

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

Mailing Address P.O. BOX 7480

City VISALIA State CA Zip Code 93290

FEC ID number of contributing federal political committee. **C** C00398750

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
 09 / 19 / 2014

Transaction ID : SA11C.7743

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Newton County Republican Club

Mailing Address 13277 FM 2626

City Bon Wier State TX Zip Code 75928

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
 08 / 19 / 2014

Transaction ID : SA11C.7698

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
NFIB THE VOICE OF FREE ENTERPRISE INC.

Mailing Address 1201 F STREET SUITE 200

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C90013509

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
 09 / 12 / 2014

Transaction ID : SA11C.7699

Amount of Each Receipt this Period
 2500.00

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 49 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
OLSON FOR CONGRESS COMMITTEE

Mailing Address PO BOX 16381

City State Zip Code
SUGAR LAND TX 77496

FEC ID number of contributing federal political committee. **C** C00437913

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 21 / 2014

Transaction ID : SA11C.7746

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
PAUL GOSAR FOR CONGRESS

Mailing Address PO BOX 2967

City State Zip Code
PRESCOTT AZ 86302

FEC ID number of contributing federal political committee. **C** C00461806

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
 07 / 09 / 2014

Transaction ID : SA11C.7705

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Phil Sandlin Campaign Account

Mailing Address PO Box 724

City State Zip Code
Deer Park TX 77536-0724

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11C.7703

Amount of Each Receipt this Period
250.00

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

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

4250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Political Action Committee of the AAOS

Mailing Address 317 Massachusetts Ave NE 1st Floor

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00343137**

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
 08 / 11 / 2014

Transaction ID : SA11C.7697

Amount of Each Receipt this Period
 2500.00

7500.00

B. Full Name (Last, First, Middle Initial)
Political Action Committee of the AAOS

Mailing Address 317 Massachusetts Ave NE 1st Floor

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00343137**

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
 08 / 29 / 2014

Transaction ID : SA11C.7731

Amount of Each Receipt this Period
 2500.00

10000.00

C. Full Name (Last, First, Middle Initial)
PROSPERITY ACTION INC.

Mailing Address 1006 PENDLETON STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00377689**

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
 09 / 26 / 2014

Transaction ID : SA11C.7761

Amount of Each Receipt this Period
 5000.00

5000.00

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

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

10000.00

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

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

FOR LINE NUMBER: PAGE 51 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE (REALPAC)

Mailing Address **801 PENNSYLVANIA AVENUE
SUITE 720**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00033779**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11C.7754

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
RIO GRANDE VALLEY SUGAR GROWERS INC POLITICAL ACTION COMMITTEE

Mailing Address **2.5 MILES WEST ON HIGHWAY 107
PO BOX 459**

City **SANTA ROSA** State **TX** Zip Code **78543**

FEC ID number of contributing federal political committee. **C C00185686**

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
09 / 16 / 2014

Transaction ID : SA11C.7700

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ROSKAM VICTORY COMMITTEE; THE

Mailing Address **610 S BOULEVARD**

City **TAMPA** State **FL** Zip Code **33606**

FEC ID number of contributing federal political committee. **C C00494674**

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
09 / 15 / 2014

Transaction ID : SA11C.7733

Amount of Each Receipt this Period
5000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address PO BOX 23219

City State Zip Code
JEFFERSON LA 70183

FEC ID number of contributing federal political committee. **C C00394957**

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
 09 / 19 / 2014

Transaction ID : SA11C.7744

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
SUGAR CANE GROWERS COOPERATIVE OF FLORIDA (PAC)

Mailing Address PO BOX 666

City State Zip Code
BELLE GLADE FL 33430

FEC ID number of contributing federal political committee. **C C00254656**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11C.7739

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
TEXTRON INC. POLITICAL ACTION COMMITTEE

Mailing Address 40 WESTMINSTER STREET

City State Zip Code
PROVIDENCE RI 02903

FEC ID number of contributing federal political committee. **C C00123612**

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
 08 / 06 / 2014

Transaction ID : SA11C.7776

Amount of Each Receipt this Period
2500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7774

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
THE SCHWAN FOOD COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 115 WEST COLLEGE DRIVE

City MARSHALL State MN Zip Code 56258

FEC ID number of contributing federal political committee. **C** C00360362

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
 09 / 26 / 2014

Transaction ID : SA11C.7762

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 700 13TH STREET NW, SUITE 350

City WASHINGTON State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2014

Transaction ID : SA11C.7720

Amount of Each Receipt this Period
 2500.00

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

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

8500.00

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

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

FOR LINE NUMBER: PAGE 54 OF 100
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

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

Mailing Address 700 13TH STREET NW, SUITE 350

City WASHINGTON State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11C.7755

Amount of Each Receipt this Period
 _____ 2500.00

B. Full Name (Last, First, Middle Initial)
USA RICE FEDERATION PAC

Mailing Address 2101 WILSON BLVD, STE 610

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C C00308478**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11C.7732

Amount of Each Receipt this Period
 _____ 1000.00

C. Full Name (Last, First, Middle Initial)
US ONCOLOGY INC. NETWORK POLITICAL ACTION COMMITTEE

Mailing Address 10101 WOODLOCH FOREST DRIVE

City THE WOODLANDS State TX Zip Code 77380

FEC ID number of contributing federal political committee. **C C00339655**

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
 07 / 28 / 2014

Transaction ID : SA11C.7712

Amount of Each Receipt this Period
 _____ 1000.00

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 55 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB (VERIZON PAC)

Mailing Address 1300 I ST NW, STE 400 WEST
ATTN: TAYLOR CRAIG

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7775

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
VOICE FOR FREEDOM

Mailing Address 2700 CUMBERLAND PARKWAY, SUITE 150

City ATLANTA State GA Zip Code 30339

FEC ID number of contributing federal political committee. **C C00409805**

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
 09 / 19 / 2014

Transaction ID : SA11C.7745

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
WEBER FOR CONGRESS

Mailing Address PO BOX 1327

City FRIENDSWOOD State TX Zip Code 77549

FEC ID number of contributing federal political committee. **C C00502229**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : SA11C.7713

Amount of Each Receipt this Period
2000.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 100
	<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)
DR BRIAN BABIN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WEST GULF MARITIME ASSOCIATION PAC

Mailing Address 1717 E LOOP NORTH SUITE 200

City HOUSTON State TX Zip Code 77029

FEC ID number of contributing federal political committee. **C** C00297671

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11C.7756

Amount of Each Receipt this Period
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

147300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Office, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO Box 22471		Amount of Each Disbursement this Period 1759.06 Transaction ID : SB17.7236
City Beaumont	State TX	
Zip Code 77701	Purpose of Disbursement Office furniture	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ANDY TOBIN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2014
Mailing Address 2532 NORTH 4TH STREET #528		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7238
City FLAGSTAFF	State AZ	
Zip Code 86004	Purpose of Disbursement Committee Contributions	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Dana R Benoit		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 4902 Bridal Wreath		Amount of Each Disbursement this Period 5766.72 Transaction ID : SB17.7361
City Richmond	State TX	
Zip Code 77406	Purpose of Disbursement Fundraiser	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8525.78
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 58 OF 100			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Berry Communications, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014		
Mailing Address 7509 Spivey Dr			Amount of Each Disbursement this Period 10000.00		
City Austin	State TX	Zip Code 78749	Transaction ID : SB17.7239		
Purpose of Disbursement Consulting		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Berry Communications, LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014		
Mailing Address 7509 Spivey Dr			Amount of Each Disbursement this Period 6000.00		
City Austin	State TX	Zip Code 78749	Transaction ID : SB17.7240		
Purpose of Disbursement Consulting		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Bison Signs			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014		
Mailing Address 10100 Clay Road			Amount of Each Disbursement this Period 1786.13		
City Houston	State TX	Zip Code 77080	Transaction ID : SB17.7242		
Purpose of Disbursement Yard Signs		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	17786.13
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 59 OF 100			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bogart Associates Inc		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 1202 Trinity Drive		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.7244
City Alexandria State VA Zip Code 22316	Purpose of Disbursement Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Bogart Associates Inc		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2014
Mailing Address 1202 Trinity Drive		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.7245
City Alexandria State VA Zip Code 22316	Purpose of Disbursement Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. By Morrell		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 2918 Ocean Mist Ct		Amount of Each Disbursement this Period 1353.12 Transaction ID : SB17.7248
City Seabrook State TX Zip Code 77589	Purpose of Disbursement Yard Signs	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6353.12
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 60 OF 100			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. By Morrell		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 2918 Ocean Mist Ct		Amount of Each Disbursement this Period 379.52 Transaction ID : SB17.7249
City Seabrook	State TX	
Purpose of Disbursement Campaign materials	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 300 1st Street, SE		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.7251
City Washington	State DC	
Purpose of Disbursement Food for event	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 300 1st Street, SE		Amount of Each Disbursement this Period 1545.65 Transaction ID : SB17.7252
City Washington	State DC	
Purpose of Disbursement Fundraising luncheon	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2225.17
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 61 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 300 1st Street, SE			Amount of Each Disbursement this Period 85.54
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Room rental		Candidate Name	Transaction ID : SB17.7254
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 300 1st Street, SE			Amount of Each Disbursement this Period 1056.00
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Luncheon		Candidate Name	Transaction ID : SB17.7255
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 300 1st Street, SE			Amount of Each Disbursement this Period 86.32
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Room rental		Candidate Name	Transaction ID : SB17.7256
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	1227.86
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 62 OF 100			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 300 1st Street, SE			Amount of Each Disbursement this Period 66.07 Transaction ID : SB17.7257
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Room rental		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 300 1st Street, SE			Amount of Each Disbursement this Period 68.13 Transaction ID : SB17.7253
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Room rental		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. CARLOS CURBELO CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2014
Mailing Address 8770 SUNSET DRIVE #355			Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7259
City MIAMI	State FL	Zip Code 33173	
Purpose of Disbursement Committe Contributions		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1134.20
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 63 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Chase Bank		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 4161.09
City Palatine	State IL	
Zip Code 60094	Purpose of Disbursement Credit Card Payment - See Below	Transaction ID : SB17.7260
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 1412.00
City Chicago	State IL	
Zip Code 60666	Purpose of Disbursement Travel	Transaction ID : SB17.7260.0
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Bookit		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 14251 Panamai City Blvd.		Amount of Each Disbursement this Period 841.75
City Panama City	State FL	
Zip Code 32413	Purpose of Disbursement Travel	Transaction ID : SB17.7260.1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4161.09
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Amtrack		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 50 Massachusetts Avenue		Amount of Each Disbursement this Period 304.00
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Travel	Transaction ID : SB17.7260.2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Chase Bank		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 3422.95
City Palatine	State IL	
Zip Code 60094	Purpose of Disbursement Credit Card Payment - See Below	Transaction ID : SB17.7261
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 673.40
City Chicago	State IL	
Zip Code 60666	Purpose of Disbursement Travel	Transaction ID : SB17.7261.4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3422.95
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 65 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 920.40
City Chicago	State IL Zip Code 60666	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : SB17.7261.5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Capitol Hill Suites		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 200 C Street. SE		Amount of Each Disbursement this Period 608.46
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Hotel	Candidate Name	Transaction ID : SB17.7261.7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Chase Bank		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 2177.74
City Palatine	State IL Zip Code 60094	
Purpose of Disbursement Credit Card Payment - See Below	Candidate Name	Transaction ID : SB17.7262
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	2177.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 100			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Amtrack			Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 50 Massachusetts Avenue			Amount of Each Disbursement this Period 98.00
City Washington	State DC	Zip Code 20002	
Purpose of Disbursement Travel		Candidate Name	Transaction ID : SB17.7262.0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Amtrack			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 50 Massachusetts Avenue			Amount of Each Disbursement this Period 142.00
City Washington	State DC	Zip Code 20002	
Purpose of Disbursement Travel		Candidate Name	Transaction ID : SB17.7262.2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address PO Box 15124			Amount of Each Disbursement this Period 95.36
City Albany	State NY	Zip Code 12212	
Purpose of Disbursement Cell phone service		Candidate Name	Transaction ID : SB17.7262.4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	[MEMO ITEM]

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 67 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 95.36
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Cell phone service	Candidate Name	Transaction ID : SB17.7262.6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 465.53
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Cell phone	Candidate Name	Transaction ID : SB17.7262.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 159.00
City Chicago	State IL Zip Code 60666	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : SB17.7262.12
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[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 68 OF 100			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Shell Oil			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 7055 Magnolia Street			Amount of Each Disbursement this Period 90.00	
City Woodville	State TX	Zip Code 75979	Transaction ID : SB17.7262.13	
Purpose of Disbursement Auto expense		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	[MEMO ITEM]		

Full Name (Last, First, Middle Initial) B. Shell Oil			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014	
Mailing Address 7055 Magnolia Street			Amount of Each Disbursement this Period 102.35	
City Woodville	State TX	Zip Code 75979	Transaction ID : SB17.7262.15	
Purpose of Disbursement Auto expense		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	[MEMO ITEM]		

Full Name (Last, First, Middle Initial) c. City of Woodville			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014	
Mailing Address 400 West Bluff			Amount of Each Disbursement this Period 150.00	
City Woodville	State TX	Zip Code 75979	Transaction ID : SB17.7264	
Purpose of Disbursement Utilities		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	150.00
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 69 OF 100			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Woodville		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 400 West Bluff		Amount of Each Disbursement this Period 83.21 Transaction ID : SB17.7265
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Utilities	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Clewood Properties		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address PO Box 519		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7268
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Clewood Properties		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address PO Box 519		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7269
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1083.21
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 70 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COFFMAN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 4950 S YOSEMITE STREET F2 #511		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7308
City Greenwood Village	State CO Zip Code 80111	
Purpose of Disbursement Committee Contributions	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Taylor Cooper		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address P.O. Box 993		Amount of Each Disbursement this Period 574.45 Transaction ID : SB17.7381
City Woodville	State TX Zip Code 75979	
Purpose of Disbursement Payroll	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Taylor Cooper		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address P.O. Box 993		Amount of Each Disbursement this Period 574.45 Transaction ID : SB17.7382
City Woodville	State TX Zip Code 75979	
Purpose of Disbursement Payroll	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2148.90
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 71 OF 100			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Taylor Cooper		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address P.O. Box 993		Amount of Each Disbursement this Period 19.45 Transaction ID : SB17.7383
City Woodville	State TX	
Purpose of Disbursement Office Supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Taylor Cooper		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address P.O. Box 993		Amount of Each Disbursement this Period 574.45 Transaction ID : SB17.7384
City Woodville	State TX	
Purpose of Disbursement Payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Taylor Cooper		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address P.O. Box 993		Amount of Each Disbursement this Period 574.45 Transaction ID : SB17.7385
City Woodville	State TX	
Purpose of Disbursement Payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1168.35
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 72 OF 100			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Taylor Cooper		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address P.O. Box 993		Amount of Each Disbursement this Period 1169.11 Transaction ID : SB17.7386
City Woodville	State TX	
Purpose of Disbursement Office Supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Taylor Cooper		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address P.O. Box 993		Amount of Each Disbursement this Period 574.45 Transaction ID : SB17.7387
City Woodville	State TX	
Purpose of Disbursement Payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Taylor Cooper		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address P.O. Box 993		Amount of Each Disbursement this Period 574.45 Transaction ID : SB17.7388
City Woodville	State TX	
Purpose of Disbursement Payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1169.11
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 73 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Taylor Cooper		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address P.O. Box 993		Amount of Each Disbursement this Period 24.93 Transaction ID : SB17.7389
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Cypher Technologies		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 205 W Gibson		Amount of Each Disbursement this Period 1245.00 Transaction ID : SB17.7270
City Jasper	State TX	
Zip Code 75951	Purpose of Disbursement Computer repairs	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. East Texas Peddler		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO Box 985		Amount of Each Disbursement this Period 1780.00 Transaction ID : SB17.7275
City Jasper	State TX	
Zip Code 75951	Purpose of Disbursement Newspaper	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3049.93
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 74 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. First Data		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 5565 Glenridge Connector NE, Suite		Amount of Each Disbursement this Period 9.90
City Atlanta	State GA Zip Code 30342	
Purpose of Disbursement Credit Card Fundraising Fee	Category/Type	Transaction ID : SB17.7281
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Harris Media, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 611 S. Congress Avenue Suite 400		Amount of Each Disbursement this Period 14798.55
City Austin	State TX Zip Code 78704	
Purpose of Disbursement Social Media	Category/Type	Transaction ID : SB17.7286
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Hearst Media		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 801 Texas Avenue		Amount of Each Disbursement this Period 750.00
City Houston	State TX Zip Code 77002	
Purpose of Disbursement Newspaper	Category/Type	Transaction ID : SB17.7288
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	15558.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 100			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address Ogden, UT 84201		Amount of Each Disbursement this Period 400.10 Transaction ID : SB17.7232
City Ogden State UT Zip Code 84201	Purpose of Disbursement Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address Ogden, UT 84201		Amount of Each Disbursement this Period 25.66 Transaction ID : SB17.7289
City Ogden State UT Zip Code 84201	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address Ogden, UT 84201		Amount of Each Disbursement this Period 400.10 Transaction ID : SB17.7290
City Ogden State UT Zip Code 84201	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	825.86
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 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address Ogden, UT 84201		Amount of Each Disbursement this Period 800.20 Transaction ID : SB17.7291
City Ogden	State UT Zip Code 84201	
Purpose of Disbursement Payroll taxes	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address Ogden, UT 84201		Amount of Each Disbursement this Period 1775.10 Transaction ID : SB17.7292
City Ogden	State UT Zip Code 84201	
Purpose of Disbursement Payroll taxes	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address Ogden, UT 84201		Amount of Each Disbursement this Period 1536.82 Transaction ID : SB17.7293
City Ogden	State UT Zip Code 84201	
Purpose of Disbursement Payroll taxes	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4112.12
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 77 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Stephen Janushkowsky		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address P.O. Box 159		Amount of Each Disbursement this Period 855.50 Transaction ID : SB17.7372
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Stephen Janushkowsky		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address P.O. Box 159		Amount of Each Disbursement this Period 855.50 Transaction ID : SB17.7373
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Stephen Janushkowsky		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address P.O. Box 159		Amount of Each Disbursement this Period 183.50 Transaction ID : SB17.7374
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Mileage Reim	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1894.50
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 100			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Stephen Janushkowsky		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address P.O. Box 159		Amount of Each Disbursement this Period 196.47 Transaction ID : SB17.7375
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Stephen Janushkowsky		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address P.O. Box 159		Amount of Each Disbursement this Period 855.50 Transaction ID : SB17.7376
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Stephen Janushkowsky		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address P.O. Box 159		Amount of Each Disbursement this Period 855.50 Transaction ID : SB17.7377
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1907.47
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 79 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Stephen Janushkowsky		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address P.O. Box 159		Amount of Each Disbursement this Period 855.50 Transaction ID : SB17.7378
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Stephen Janushkowsky		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address P.O. Box 159		Amount of Each Disbursement this Period 167.00 Transaction ID : SB17.7379
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Mileage Reimb.	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Stephen Janushkowsky		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address P.O. Box 159		Amount of Each Disbursement this Period 1049.37 Transaction ID : SB17.7380
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2071.87
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 80 OF 100			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JENKINS FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address PO BOX 727			Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7277
City HUNTINGTON	State WV	Zip Code 25711	
Purpose of Disbursement Committee Contributions		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Randy Kozlovsky			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 935 Eldridge			Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.7365
City Sugar Land	State TX	Zip Code 77478	
Purpose of Disbursement Photographer		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. LEE TERRY FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address PO BOX 540098			Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7295
City OMAHA	State NE	Zip Code 68154	
Purpose of Disbursement Committee Contributions		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	2250.00
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 81 OF 100			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Liberty Gazette			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014	
Mailing Address 314 Main St.			Amount of Each Disbursement this Period 414.77	
City Liberty	State TX	Zip Code 77575	Transaction ID : SB17.7298	
Purpose of Disbursement Newspaper		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Majority Designs			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014	
Mailing Address 4020 N Lincoln Blvd			Amount of Each Disbursement this Period 2436.30	
City Oklahoma City	State OK	Zip Code 73105	Transaction ID : SB17.7304	
Purpose of Disbursement Printing		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Menus Catering			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014	
Mailing Address 655 Taylor Street, NE			Amount of Each Disbursement this Period 353.15	
City Washington	State DC	Zip Code 20017	Transaction ID : SB17.7306	
Purpose of Disbursement Food for event		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3204.22
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 82 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. Larry D. Meyers			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014	
Mailing Address 412 1st St SE			Amount of Each Disbursement this Period 450.00	
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.7781	
Purpose of Disbursement In-kind - Catering expense		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Mary Moody			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 109 Inwood Drive			Amount of Each Disbursement this Period 947.02	
City Silsbee	State TX	Zip Code 77656	Transaction ID : SB17.7367	
Purpose of Disbursement Payroll		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Mary Moody			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 109 Inwood Drive			Amount of Each Disbursement this Period 72.50	
City Silsbee	State TX	Zip Code 77656	Transaction ID : SB17.7368	
Purpose of Disbursement Mileage Reimb.		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1469.52
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 83 OF 100			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Category/Type	Transaction ID : SB17.7313
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 5.76
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Category/Type	Transaction ID : SB17.7314
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 1.44
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Category/Type	Transaction ID : SB17.7315
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12.95
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 84 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 9,999,999.99 11.50
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Candidate Name	Transaction ID : SB17.7316
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 9,999,999.99 57.50
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Candidate Name	Transaction ID : SB17.7317
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 9,999,999.99 29.00
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Piryx	Candidate Name	Transaction ID : SB17.7318
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	98.00
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 85 OF 100			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 5.75
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Candidate Name	Transaction ID : SB17.7319
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 29.00
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Candidate Name	Transaction ID : SB17.7320
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 307.63
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Candidate Name	Transaction ID : SB17.7321
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	342.38
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 86 OF 100			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Category/Type	Transaction ID : SB17.7322
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 1.44
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Category/Type	Transaction ID : SB17.7323
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Category/Type	Transaction ID : SB17.7324
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	18.70
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 87 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 1.44 Transaction ID : SB17.7325
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 28.75 Transaction ID : SB17.7326
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.7327
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	35.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 100			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 17.25 Transaction ID : SB17.7328
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 74.77 Transaction ID : SB17.7329
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Piryx, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7330
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	106.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 100			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ryan Data & Research			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014		
Mailing Address P.O. Box 202675			Amount of Each Disbursement this Period 1000.00		
City Austin	State TX	Zip Code 78720	Transaction ID : SB17.7332		
Purpose of Disbursement Voter Data		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Josh Sexton			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014		
Mailing Address 4602 Katies Creek Avenue			Amount of Each Disbursement this Period 217.00		
City Baytown	State TX	Zip Code 77523	Transaction ID : SB17.7370		
Purpose of Disbursement Contract labor		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Josh Sexton			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014		
Mailing Address 4602 Katies Creek Avenue			Amount of Each Disbursement this Period 156.00		
City Baytown	State TX	Zip Code 77523	Transaction ID : SB17.7371		
Purpose of Disbursement Mileage Reimb.		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	1373.00
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 90 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Smokin' Aces		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 203 S Pecan		Amount of Each Disbursement this Period 555.00 Transaction ID : SB17.7337
City Woodville	State TX	
Purpose of Disbursement Food/volunteer event		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. SOUTHERLAND FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address PO BOX 1692		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7339
City LYNN HAVEN	State FL	
Purpose of Disbursement Committee Contributions		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Texas Workforce Commission		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address P.O. Box 149037		Amount of Each Disbursement this Period 258.12 Transaction ID : SB17.7344
City Austin	State TX	
Purpose of Disbursement Payroll Liabilities		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	1813.12
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 91 OF 100			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Dam Good Times		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address P.O. Box 2911		Amount of Each Disbursement this Period 1500.00
City League City	State TX	
Zip Code 77574	Purpose of Disbursement Newspaper	Transaction ID : SB17.7343
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Political Firm		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 5555 Hilton, Ste 203		Amount of Each Disbursement this Period 3000.00
City Baton Rouge	State LA	
Zip Code 70808	Purpose of Disbursement Consulting	Transaction ID : SB17.7346
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 307 W. Wheat St		Amount of Each Disbursement this Period 49.00
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Postage	Transaction ID : SB17.7349
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4549.00
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 92 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 307 W. Wheat St		Amount of Each Disbursement this Period 7.69 Transaction ID : SB17.7351
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 307 W. Wheat St		Amount of Each Disbursement this Period 12.65 Transaction ID : SB17.7352
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 307 W. Wheat St		Amount of Each Disbursement this Period 49.00 Transaction ID : SB17.7350
City Woodville	State TX	
Zip Code 75979	Purpose of Disbursement Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	69.34
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 93 OF 100			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wallings Signs and Graphics			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014		
Mailing Address 211 South Magnolia			Amount of Each Disbursement this Period 636.51		
City Woodville	State TX	Zip Code 75979	Transaction ID : SB17.7356		
Purpose of Disbursement Campaign materials		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Wallings Signs and Graphics			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014		
Mailing Address 211 South Magnolia			Amount of Each Disbursement this Period 44.38		
City Woodville	State TX	Zip Code 75979	Transaction ID : SB17.7357		
Purpose of Disbursement Campaign materials		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Wallings Signs and Graphics			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014		
Mailing Address 211 South Magnolia			Amount of Each Disbursement this Period 417.30		
City Woodville	State TX	Zip Code 75979	Transaction ID : SB17.7358		
Purpose of Disbursement Campaign materials		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	1098.19
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 94 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kelly Waterman		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 316 Hogan		Amount of Each Disbursement this Period 2931.00
City Houston	State TX	
Zip Code 77009	Purpose of Disbursement Payroll	Transaction ID : SB17.7363
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Kelly Waterman		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 316 Hogan		Amount of Each Disbursement this Period 1920.75
City Houston	State TX	
Zip Code 77009	Purpose of Disbursement Payroll	Transaction ID : SB17.7364
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. YOUNG FOR IOWA, INC.		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address PO BOX 162		Amount of Each Disbursement this Period 1000.00
City VAN METER	State IA	
Zip Code 50261	Purpose of Disbursement Committee Contributions	Transaction ID : SB17.7272
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5851.75
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 95 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ZELDIN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2014
Mailing Address 47 FLINTLOCK DRIVE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7297
City SHIRLEY State NY Zip Code 11967	Purpose of Disbursement Committee Contributions	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ZINKE FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address PO BOX 1596		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7334
City HELENA State MT Zip Code 59624	Purpose of Disbursement Committee Contributions	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	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:		

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	106446.32

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 96 OF 100	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jordan W. Reese		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address P.O. Bxo 12724		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB20A.7398
City Beaumont	State TX	
Zip Code 77726	Purpose of Disbursement Refund requested	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Willis Brothers Energy, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 303 N Jackson		Amount of Each Disbursement this Period 500.00 Transaction ID : SB20A.7393
City Luling	State TX	
Zip Code 77351	Purpose of Disbursement Corporate donation refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

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

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 97 OF 100	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DR BRIAN BABIN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MAJORITY COMMITTEE PAC--MC PAC		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address P.O. BOX 10134		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB20B.7396
City BAKERSFIELD	State CA	
Zip Code 93389	Purpose of Disbursement Excess contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MARLIN PAC		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address PO BOX 26141		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB20B.7395
City ALEXANDRIA	State VA	
Zip Code 22313	Purpose of Disbursement Excess contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. OLSON FOR CONGRESS COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address PO BOX 16381		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB20B.7394
City SUGAR LAND	State TX	
Zip Code 77496	Purpose of Disbursement Excess contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) **DR BRIAN BABIN FOR CONGRESS** Transaction ID : **SC/10.4161**

LOAN SOURCE Full Name (Last, First, Middle Initial) **BRIAN BABIN** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address PO BOX 159
 City WOODVILLE State TX ZIP Code 75979

Original Amount of Loan 25000.00	Cumulative Payment To Date 8000.00	Balance Outstanding at Close of This Period 17000.00
-------------------------------------	---------------------------------------	---

TERMS
 Date Incurred: M 12 / D 17 / Y 2013
 Date Due: M / D / Y None
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 17000.00
TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DR BRIAN BABIN FOR CONGRESS** Transaction ID : **SC/10.4162**

LOAN SOURCE Full Name (Last, First, Middle Initial) BRIAN BABIN	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 159		

City	State	ZIP Code
WOODVILLE	TX	75979

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	M 12 / D 31 / Y 2013 Y	M M / D D / Y None Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	25000.00
TOTALS This Period (last page in this line only).....	▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) **DR BRIAN BABIN FOR CONGRESS** Transaction ID : **SC/10.4517**

LOAN SOURCE Full Name (Last, First, Middle Initial) BRIAN BABIN	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 159		

City	State	ZIP Code
WOODVILLE	TX	75979

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	M M / D D / Y Y Y Y 02 / 11 / 2014	M M / D D / Y Y Y Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	25000.00
TOTALS This Period (last page in this line only).....	67000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.