

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL GARRET GRAVES FOR CONGRESS			
ADDRESS (number and street) PO BOX 64845			
CITY, STATE, and ZIP CODE BATON ROUGE LA 70896			
2. NAME OF CANDIDATE GARRET GRAVES	3. OFFICE SOUGHT (State and District) House LA 06		4. FEC IDENTIFICATION NUMBER C00558486
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer MR. CHRISTOPHER G BLANCHARD 909 LAFAYETTE ST NEW ORLEANS LA 70113		Name of Employer COOPER T SMITH Transaction ID : F6.13553 Occupation MARITIME	Date (month, day, year) 12/03/2014 Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer MICHAEL R CALABRESE 17907 E AUGUSTA DRIVE BATON ROUGE LA 70810		Name of Employer CAJUN INDUSTRIES, LLC Transaction ID : F6.13554 Occupation SENIOR VP	Date (month, day, year) 12/03/2014 Amount 2600.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer MICHAEL C MORAN 12520 W LAKE ESTATE BATON ROUGE LA 70810		Name of Employer CAJUN MARITIME Transaction ID : F6.13555 Occupation PRESIDENT	Date (month, day, year) 12/03/2014 Amount 2600.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer PAUL J MURRAY PO BOX 278 DESTREHAN LA 70047		Name of Employer MURRAY ARCHITECTS Transaction ID : F6.13557 Occupation EXECUTIVE	Date (month, day, year) 12/03/2014 Amount 2600.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer ANGELA O'BYRNE 3700 ORLEANS AVENUE APT. 5321 NEW ORLEANS LA 70119		Name of Employer PEREZ, APC Transaction ID : F6.13560 Occupation PRESIDENT	Date (month, day, year) 12/03/2014 Amount 2600.00
SIGNATURE (optional) CHRISTEL SLAUGHTER <i>[Electronically Filed]</i>		DATE 12/05/2014	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

FEC FORM 6
(Revised 07/2011)

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE MR. JOHN D SCANLAN 10440 SHADOW LAKE DR GEISMAR LA 70734	Name of Employer EATEL Transaction ID : F6.13559 Occupation EXECUTIVE	Date (month, day, year) 12/03/2014	Amount 2600.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE AMERICAN WATERWAYS OPERATORS-PAC 801 N. QUINCY STREET ARLINGTON VA 22203	Name of Employer Transaction ID : F6.13549 Occupation	Date (month, day, year) 12/03/2014	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE ECOPAC 370 WABASHA STREET NORTH ST. PAUL MN 55102	Name of Employer Transaction ID : F6.13543 Occupation	Date (month, day, year) 12/03/2014	Amount 3000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE MCGUIREWOODS LLP ONE JAMES CENTER RICHMOND VA 23219	Name of Employer Transaction ID : F6.13547 Occupation	Date (month, day, year) 12/03/2014	Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE 1125 EXECUTIVE CIRCLE IRVING TX 75038	Name of Employer Transaction ID : F6.13551 Occupation	Date (month, day, year) 12/03/2014	Amount 1000.00

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE OXPAC OCCIDENTAL PETROLEUM CORPORATION PAC 10889 WILSHIRE BLVD LOS ANGELES CA 90024	Name of Employer Transaction ID : F6.13541 Occupation	Date (month, day, year) 12/03/2014	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE PAC66 670 AB BARTLESVILLE OK 74003	Name of Employer Transaction ID : F6.13545 Occupation	Date (month, day, year) 12/03/2014	Amount 2500.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount