

# 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  
**FRIENDS OF DAVE BRAT**

ADDRESS (number and street) PO BOX 5094  
 Check if different than previously reported. (ACC) GLEN ALLEN VA 23058

2. **FEC IDENTIFICATION NUMBER** C C00554949 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY STATE ZIP CODE STATE DISTRICT  
VA 07

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y in the State of  

(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y 12 / 31 / 2013 through M M / D D / Y Y Y Y 03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer STEVEN D'AMBROSIA

Signature of Treasurer STEVEN D'AMBROSIA [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 15 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**FRIENDS OF DAVE BRAT**

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))....	89610.53	89610.53
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	89610.53	89610.53
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	47192.85	47192.85
(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)).....	47192.85	47192.85
8. Cash on Hand at Close of Reporting Period (from Line 27).....	42417.68	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**FRIENDS OF DAVE BRAT**

Report Covering the Period: From: M M / D D / Y Y Y Y 12 / 31 / 2013 To: M M / D D / Y Y Y Y 03 / 31 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	63377.53	63377.53
(ii) Unitemized.....	25183.00	25183.00
(iii) TOTAL of contributions from individuals ▶	88560.53	88560.53
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	1050.00	1050.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	89610.53	89610.53
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	89610.53	89610.53

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	47192.85	47192.85
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	47192.85	47192.85

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	89610.53
25. SUBTOTAL (add Line 23 and Line 24).....	89610.53
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	47192.85
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	42417.68

**SCHEDULE A (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 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Al Aitken**

Mailing Address 13165 Spinner Ridge

City State Zip Code  
Culpeper VA 22701

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  
500.00

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

**Transaction ID : SA11AI.5253**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2510 Broad Street Rd

City State Zip Code  
Gum Spring VA 23065

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  
225.00

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

**Transaction ID : SA11AI.5310**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 3497 Lakeview Road

City State Zip Code  
Mechanicsville VA 23111

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

Name of Employer Occupation  
Owner Baugh Auto Body

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.4704**

Amount of Each Receipt this Period  
2600.00

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

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

3200.00

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

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

FOR LINE NUMBER: PAGE 6 OF 49  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Gerry Baugh**

Mailing Address 3497 Lakeview Road

City State Zip Code  
Mechanicsville VA 23111

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

Name of Employer Occupation  
Owner Baugh Auto Body

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

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

**Transaction ID : SA11AI.4706**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 3497 Lakeview Road

City State Zip Code  
Mechanicsville VA 23111

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

Name of Employer Occupation  
Baugh Auto Body Administration

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.4707**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 3497 Lakeview Road

City State Zip Code  
Mechanicsville VA 23111

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

Name of Employer Occupation  
Baugh Auto Body Administration

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

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

**Transaction ID : SA11AI.4709**

Amount of Each Receipt this Period  
100.00

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

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

2800.00

**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 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Daniel Brat**

Mailing Address 1365 Clifton Road

City Atlanta State GA Zip Code 30033

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

Name of Employer Emory University Hospital Occupation Pathologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.4107**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 1700

City Los Angeles State CA Zip Code 90064

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

Name of Employer Pircher, Nicholas & Meeks Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.4945**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 167 Windsor Court

City Saint Paul State MN Zip Code 55112

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

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

**Transaction ID : SA11AI.4684**

Amount of Each Receipt this Period  
 1000.00

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

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

4600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Paul Brat**

Mailing Address 167 Windsor Court

City Saint Paul State MN Zip Code 55112

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : SA11Al.4897**

Amount of Each Receipt this Period  
 100.00

Amount of Each Receipt this Period  
 1100.00

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

Mailing Address 12432 Ashcake Road

City Ashland State VA Zip Code 23005

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

Name of Employer Randolph-Macon College Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11Al.4670**

Amount of Each Receipt this Period  
 250.00

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 32822 n 40th place

City cave creek State AZ Zip Code 85331

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

Name of Employer self Occupation Politician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11Al.4365**

Amount of Each Receipt this Period  
 500.00

Amount of Each Receipt this Period  
 500.00

**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 9 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Peggy Cross**

Mailing Address 9064 Stumpy Road

City Ashland State VA Zip Code 23005

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

Name of Employer Cross Family Properties Occupation Office Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.4918**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 800 North Main Street

City Mount Crawford State VA Zip Code 22841

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

Name of Employer Power Monitors Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5081**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 3805 Peakland Place

City Lynchburg State VA Zip Code 24503

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

Name of Employer English Construction Occupation Project Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11AI.4822**

Amount of Each Receipt this Period  
 500.00

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

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

3350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. Will Denton</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2014	
Mailing Address 13054 Winns Church Road		<b>Transaction ID : SA11AI.4730</b>	
City Glen Allen	State VA	Zip Code 23059	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) <b>B. Will Denton</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2014	
Mailing Address 13054 Winns Church Road		<b>Transaction ID : SA11AI.4732</b>	
City Glen Allen	State VA	Zip Code 23059	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
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 2700.00		

Full Name (Last, First, Middle Initial) <b>C. JOHN DILLINGHAM</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 17 / 2014	
Mailing Address 14400 COACHWAY DRIVE		<b>Transaction ID : SA11AI.4163</b>	
City CENTREVILLE	State VA	Zip Code 20120	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer M.M. TATE & CO.	Occupation REAL ESTATE DEVELOPMENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2950.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

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

Mailing Address 14400 COACHWAY DRIVE

City State Zip Code  
CENTREVILLE VA 20120

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

Name of Employer Occupation  
M.M. TATE & CO. REAL ESTATE DEVELOPMENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 28 / 2014

**Transaction ID : SA11AI.4890**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 12350 NORTH OAKS DRIVE

City State Zip Code  
ASHLAND VA 23005

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

Name of Employer Occupation  
LBW BUSINESS SOLUTIONS VICE PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11AI.4130**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 5108 Park Meadows Ct.

City State Zip Code  
Glen Allen VA 23059

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

Name of Employer Occupation  
retired retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11AI.4862**

Amount of Each Receipt this Period  
100.00

**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 12 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>Elizabeth Fisher</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 26 / 2014	
Mailing Address 12288 Hanover Courthouse		<b>Transaction ID : SA11AI.4886</b>	
City Hanover	State VA	Zip Code 23069	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer RMC	Occupation Professor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>Elizabeth Whitley Fulton</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 19 / 2014	
Mailing Address 650 Front Street		<b>Transaction ID : SA11AI.5012</b>	
City Lovington	State VA	Zip Code 22949	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer MAS Labor	Occupation Business Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>James George</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014	
Mailing Address 2232 42nd Ave		<b>Transaction ID : SA11AI.4900</b>	
City Salem	State OR	Zip Code 97317	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer Inquired	Occupation Inquired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2400.00
<b>TOTAL</b> This Period (last page this line number only).....	2400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. Deborah Giffin</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 24 / 2014	
Mailing Address 1809 Nortonia Road		<b>Transaction ID : SA11AI.4701</b>	
City Richmond	State VA	Zip Code 23229	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2600.00	
Name of Employer Magenta Consulting	Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) <b>B. Deborah Giffin</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 24 / 2014	
Mailing Address 1809 Nortonia Road		<b>Transaction ID : SA11AI.4703</b>	
City Richmond	State VA	Zip Code 23229	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer Magenta Consulting	Occupation Owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

Full Name (Last, First, Middle Initial) <b>C. Matt Griggs</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 26 / 2014	
Mailing Address 11921 Rockville Pike		<b>Transaction ID : SA11AI.4654</b>	
City Rockville	State MD	Zip Code 20852	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer Merrill Lynch	Occupation Financial Advisor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2950.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Fred Gruber**

Mailing Address 59 S Lakeshore Drive

City State Zip Code  
Louis VA 23093

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

Name of Employer Occupation  
Sound Enterprises Investment Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 21 / 2014

**Transaction ID : SA11AI.4601**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 310 Watts Street

City State Zip Code  
Durham NC 27701

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11AI.4750**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 5304 Singletree Court

City State Zip Code  
Glen Allen VA 23060

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

Name of Employer Occupation  
AIS Services President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 19 / 2014

**Transaction ID : SA11AI.5281**

Amount of Each Receipt this Period  
500.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Ron Hedlund**

Mailing Address 5304 Singletree Court

City State Zip Code  
Glen Allen VA 23060

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

Name of Employer Occupation  
AIS Services President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700.00**

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

**Transaction ID : SA11AI.5037**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 4416 Hickory Lake Terrace

City State Zip Code  
Glen Allen VA 23059

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

Name of Employer Occupation  
Capital One 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  
**01 / 30 / 2014**

**Transaction ID : SA11AI.4715**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 200 Fokk Mountain Lane

City State Zip Code  
Flint Hill VA 22627

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

Name of Employer Occupation  
none house wife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 01 / 2014**

**Transaction ID : SA11AI.4223**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Patti Hornstra**

Mailing Address 12420 Lynwood Drive

City State Zip Code  
Glen Allen VA 23059

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

Name of Employer Occupation  
Remax Commonwealth Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11AI.4717**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1263 Flat Rock Crossing

City State Zip Code  
Manakin Sabot VA 23103

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11AI.5217**

Amount of Each Receipt this Period  
250.00

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

Mailing Address Navair Air

City State Zip Code  
Patuxent River NA MD 20670

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

Name of Employer Occupation  
US Navy Civilian 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  
 02 / 19 / 2014

**Transaction ID : SA11AI.4587**

Amount of Each Receipt this Period  
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

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

Mailing Address 696 Caroline Drive

City Ruther Glen State NY Zip Code 22546

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

Name of Employer USN Occupation Electrical 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  
 02 / 13 / 2014

**Transaction ID : SA11AI.4516**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 17008 Parsons Blvd

City Beaverdam State VA Zip Code 23015

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

Name of Employer Southeastern Underwriters Occupation Bookkeeper

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11AI.4844**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 10800 Wildflower Ln

City Lee's Summit State MO Zip Code 64086

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

Name of Employer The Advertising Store, Inc Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1190.00

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

**Transaction ID : SA11AI.5328**

Amount of Each Receipt this Period  
1190.00  
In-kind - Bumper Stickers

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

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

1940.00

**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 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Cameron Jones**

Mailing Address 4801 Stonecraft Blvd

City Chantilly State VA Zip Code 20151

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

Name of Employer TASC Inc Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 29 / 2014

**Transaction ID : SA11AI.5089**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 18120 Southern Cross Lane

City Beaverdam State VA Zip Code 23015

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

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

**Transaction ID : SA11AI.4710**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 18120 Southern Cross Lane

City Beaverdam State VA Zip Code 23015

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

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

**Transaction ID : SA11AI.4712**

Amount of Each Receipt this Period  
 100.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

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

Mailing Address 6802 Paragon pl

City Richmond State VA Zip Code 23230

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

Name of Employer Kinsale management inc. Occupation Insurance sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11AI.4208**

Amount of Each Receipt this Period  
250.00

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

Mailing Address Foxwood - 2048 Cardwell

City Crozier State VA Zip Code 23039

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  
 02 / 19 / 2014

**Transaction ID : SA11AI.4782**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 11102 Fawn Lake Pkwy

City Spotsylvania State VA Zip Code 22553

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  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 17 / 2014

**Transaction ID : SA11AI.4772**

Amount of Each Receipt this Period  
300.00

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

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

1550.00

**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 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Aldo Laghi**

Mailing Address 2895 42nd Avenue North

City State Zip Code  
St. Petersburg FL 33714

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

Name of Employer Occupation  
Alps South LLC CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.4633**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 11780 Weisinger Lane

City State Zip Code  
Midlothian VA 23113

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  
500.00

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

**Transaction ID : SA11AI.5092**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 840 FM 2224

City State Zip Code  
Holliday TX 76366

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

Name of Employer Occupation  
Lindemann Drilling Co Inc 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  
 02 / 13 / 2014

**Transaction ID : SA11AI.4790**

Amount of Each Receipt this Period  
500.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>Christine Lindsay</b>		Date of Receipt MM / DD / YYYY 02 / 26 / 2014
Mailing Address PO Box 11621		<b>Transaction ID : SA11AI.4893</b>
City Loudonville	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer None	Occupation Homemaker	Election Cycle-to-Date 1000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Richard Link</b>		Date of Receipt MM / DD / YYYY 02 / 28 / 2014
Mailing Address 2159 Wildflower Way		<b>Transaction ID : SA11AI.4942</b>
City Locust Grove	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Skylia Engineering	Occupation DoD Logistics Analyst	Election Cycle-to-Date 300.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>M William Mansfield</b>		Date of Receipt MM / DD / YYYY 02 / 26 / 2014
Mailing Address 8123 Twin Creek Trail		<b>Transaction ID : SA11AI.4860</b>
City Mechanicsville	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Retired	Occupation Retired	Election Cycle-to-Date 600.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 22 OF 49  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF DAVE BRAT**

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

Mailing Address 14 W Runswick Dr

City State Zip Code  
Henrico VA 23238

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11AI.4871**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 8306 CHANDON PLACE

City State Zip Code  
CHESTERFIELD VA 23838

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

Name of Employer Occupation  
HCA IT DIRECTOR

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 17 / 2014

**Transaction ID : SA11AI.4168**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 560 Ice House Ct

City State Zip Code  
Manakin Sabot VA 23103

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

Name of Employer Occupation  
O'Brien Associates Consultant

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2014

**Transaction ID : SA11AI.5231**

Amount of Each Receipt this Period  
300.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Gordon Miller**

Mailing Address 4470 Cox Road, Suite 160

City	State	Zip Code
Glen Allen	VA	23060

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

Name of Employer	Occupation
G3 Systems, Inc	CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11AI.4656**

Amount of Each Receipt this Period

2500.00

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

Mailing Address 4817 COBBLESTONE LANDING PL

City	State	Zip Code
GLEN ALLEN	VA	23059

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

Name of Employer	Occupation
NONE	HOUSEWIFE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 22 / 2014

**Transaction ID : SA11AI.4181**

Amount of Each Receipt this Period

2500.00

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

Mailing Address 9424 Paigefield Ct

City	State	Zip Code
Richmond	VA	23229

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

Name of Employer	Occupation
VDOT	IT Security Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5387**

Amount of Each Receipt this Period

487.53  
In-kind - Refreshments, Event Set up Fee

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

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

5487.53

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. Henry Moriconi</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2014	
Mailing Address 9424 Paigefield Ct		<b>Transaction ID : SA11AI.5101</b>	
City Richmond	State VA	Zip Code 23229	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer VDOT	Occupation IT Security Analyst		Amount of Each Receipt this Period 987.53
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 987.53		

Full Name (Last, First, Middle Initial) <b>B. DANIEL MORTENSEN</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 13 / 2014	
Mailing Address 13286 BARKSTONE COURT		<b>Transaction ID : SA11AI.4147</b>	
City RICHMOND	State VA	Zip Code 23238	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation RETIRED		Amount of Each Receipt this Period 1000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Janice Moxley</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2014	
Mailing Address 269 Baldwin Lane		<b>Transaction ID : SA11AI.5277</b>	
City Staunton	State VA	Zip Code 24401	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Homemaker		Amount of Each Receipt this Period 250.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Aaron Moyer**

Mailing Address 60 Dairy Road

City Ruckerville State VA Zip Code 22968

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

Name of Employer self Occupation engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.4914**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 5434 Fallman Dr

City Mechanicsville State VA Zip Code 23116

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

Name of Employer King William Industrial Park Occupation Secretary

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : SA11AI.4908**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 1480 Barnes Road

City Chase City State VA Zip Code 23924

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

Name of Employer Drager Medical Occupation Technical Service Specialist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.5311**

Amount of Each Receipt this Period  
 150.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN TYLER NICHOLS**

Mailing Address 5415 TUCKAHOE AVENUE

City Richmond State VA Zip Code 23226

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

Name of Employer VIRGINIA COMMUNITY DEVELOPMENT Occupation REAL ESTATE FINANCE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

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

**Transaction ID : SA11AI.4132**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 1636 DORSET MEADOWS LANE

City POWHATAN State VA Zip Code 23139

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

Name of Employer AMERICAN AIRLINES Occupation AIRLINE PILOT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 17 / 2014

**Transaction ID : SA11AI.4167**

Amount of Each Receipt this Period  
 400.00

**C.** Full Name (Last, First, Middle Initial)  
**L. Reed O'Brien**

Mailing Address 10006 Walsham Court

City Richmond State VA Zip Code 23238

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

Name of Employer O'Brien Associates Occupation Educational Associates

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 300.00

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

**Transaction ID : SA11AI.5229**

Amount of Each Receipt this Period  
 300.00

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

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

950.00

**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 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Elizabeth Powell**

Mailing Address 10050 White Shop Rd

City Culpeper State VA Zip Code 22701

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11AI.4881**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 10050 White Shop Rd

City Culpeper State VA Zip Code 22701

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11AI.4883**

Amount of Each Receipt this Period  
 400.00

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

Mailing Address 555 N Dry Well Road

City Natural Bridge State VA Zip Code 24578

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 10 / 2014

**Transaction ID : SA11AI.4686**

Amount of Each Receipt this Period  
 500.00

**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 28 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Ernest Ragland**

Mailing Address 555 N Dry Well Road

City State Zip Code  
Natural Bridge VA 24578

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  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11AI.4836**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 14505 St. Stephans Place

City State Zip Code  
Midlothian VA 23113

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

Name of Employer Occupation  
none Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.4615**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 6310 Towering Oak Road

City State Zip Code  
Fredericksburg VA 22407

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

Name of Employer Occupation  
Edward Jones Financial Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 18 / 2014

**Transaction ID : SA11AI.4785**

Amount of Each Receipt this Period  
250.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Frederick Joseph Ryan**

Mailing Address 3421 Bronco Ln

City Mechanicsville State VA Zip Code 23111

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

Name of Employer Axiom Supply & Demand Occupation Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11AI.4884**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address PO Box 248

City Crozier State VA Zip Code 23039

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 16 / 2014

**Transaction ID : SA11AI.4807**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address PO Box 248

City Crozier State VA Zip Code 23039

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

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 16 / 2014

**Transaction ID : SA11AI.4809**

Amount of Each Receipt this Period  
 100.00

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF DAVE BRAT**

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

Mailing Address PO Box 248

City Crozier State VA Zip Code 23039

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

Name of Employer McGuire Woods Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 16 / 2014

**Transaction ID : SA11AI.4810**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address PO Box 248

City Crozier State VA Zip Code 23039

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

Name of Employer McGuire Woods Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 16 / 2014

**Transaction ID : SA11AI.4812**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 512 launa lane

City arrotto grand State CA Zip Code 93420

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

Name of Employer coastal phoenix inc Occupation office manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 19 / 2014

**Transaction ID : SA11AI.4567**

Amount of Each Receipt this Period  
 500.00

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

**A.** Full Name (Last, First, Middle Initial)  
**Kim Singhas**

Mailing Address 13483 Lakeview Farm Place

City Ashland State VA Zip Code 23005

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

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

**Transaction ID : SA11AI.4692**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 4319 Margate Dr

City Dallas State TX Zip Code 75220

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

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

**Transaction ID : SA11AI.4952**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 11701 Country Lake Drive

City Glen Allen State VA Zip Code 23059

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

Name of Employer Home Dad Occupation Stay at Home Dad

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.4204**

Amount of Each Receipt this Period  
 250.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. Stephan Tetrault</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 9311 Shannon Rd		<b>Transaction ID : SA11AI.5107</b>
City Mechanicsville	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) <b>B. Scott Wierda</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 50 Louis Suite 600		<b>Transaction ID : SA11AI.5031</b>
City Grand Rapids	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer CWD Real Estate Investment	Occupation Commercial Real Estate	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Emory Williams</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address Retired		<b>Transaction ID : SA11AI.4242</b>
City Richmond	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Retired	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 49
	<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)  
**FRIENDS OF DAVE BRAT**

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

Mailing Address 11201 Fox Meadow Dr

City Richmond State VA Zip Code 23233

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

Name of Employer Best Effort Occupation Best Effort

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11AI.4877**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1340 Mosbys Reach

City Charlottesville State VA Zip Code 22901

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

Name of Employer Self Occupation Light Point Impressions

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.4912**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2000.00

63377.53

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 49
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>DAVID ALAN BRAT</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013	
Mailing Address 11601 HICKORY LAKE TERRACE		<b>Transaction ID : SA11D.5120</b>	
City State Zip Code GLEN ALLEN VA 23059	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C H4VA07143	Name of Employer Occupation Randolph Macon Professor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>DAVID ALAN BRAT</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 03 / 2014	
Mailing Address 11601 HICKORY LAKE TERRACE		<b>Transaction ID : SA11D.5128</b>	
City State Zip Code GLEN ALLEN VA 23059	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C H4VA07143	Name of Employer Occupation Randolph Macon Professor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00		

Full Name (Last, First, Middle Initial) <b>DAVID ALAN BRAT</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2014	
Mailing Address 11601 HICKORY LAKE TERRACE		<b>Transaction ID : SA11D.5129</b>	
City State Zip Code GLEN ALLEN VA 23059	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C H4VA07143	Name of Employer Occupation Randolph Macon Professor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1050.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	1050.00

**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 35 OF 49		
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 1 ADP Boulevard		Amount of Each Disbursement this Period 4661.03
City Roseland	State NJ	
Zip Code 07068	Purpose of Disbursement Payroll - See Memo	Transaction ID : SB17.5354
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Zachary Werrell</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 420 N 23rd Street		Amount of Each Disbursement this Period 2249.77
City Richmond	State VA	
Zip Code 23223	Purpose of Disbursement Payroll - Zachary Werrell	Transaction ID : SB17.5354.0
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Steve Waters</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 1505 Leewal Court		Amount of Each Disbursement this Period 2411.26
City Henrico	State VA	
Zip Code 23238	Purpose of Disbursement Payroll - Steve Waters	Transaction ID : SB17.5354.1
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2104 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4661.03
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 49			
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 1 ADP Boulevard		Amount of Each Disbursement this Period 2009.17 <b>Transaction ID : SB17.5358</b>
City Roseland	State NJ	
Zip Code 07068	Purpose of Disbursement Payroll Taxes - See memo	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. IRS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 1111 Constitution Ave		Amount of Each Disbursement this Period 750.23 <b>Transaction ID : SB17.5358.0</b> <b>[MEMO ITEM]</b>
City Washington	State DC	
Zip Code 20224	Purpose of Disbursement Payroll Taxes - Taxes Withheld Zachary Werrell	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. IRS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 1111 Constitution Ave		Amount of Each Disbursement this Period 588.74 <b>Transaction ID : SB17.5358.1</b> <b>[MEMO ITEM]</b>
City Washington	State DC	
Zip Code 20224	Purpose of Disbursement Payroll Taxes - Withheld Steve Waters	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2009.17
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 49			
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. IRS</b>		M M / D D / Y Y Y Y 01 / 30 / 2014	
Mailing Address 1111 Constitution Ave		Amount of Each Disbursement this Period	
City Washington State DC Zip Code 20224		335.10	
Purpose of Disbursement Payroll Taxes - Employer Liability for Zachary Werrell		Transaction ID : SB17.5358.2	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type		001	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. IRS</b>		M M / D D / Y Y Y Y 01 / 30 / 2014	
Mailing Address 1111 Constitution Ave		Amount of Each Disbursement this Period	
City Washington State DC Zip Code 20224		355.10	
Purpose of Disbursement Payroll Taxes - Employer Liability for Steve Waters		Transaction ID : SB17.5358.3	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type		001	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. ADP</b>		M M / D D / Y Y Y Y 02 / 07 / 2014	
Mailing Address 1 ADP Boulevard		Amount of Each Disbursement this Period	
City Roseland State NJ Zip Code 07068		310.00	
Purpose of Disbursement Payroll fees		Transaction ID : SB17.5146	
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014	
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type		001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	310.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 49		
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 1 ADP Boulevard		Amount of Each Disbursement this Period 5932.53
City Roseland	State NJ	
Zip Code 07068	Purpose of Disbursement Payroll - See Memo	<b>Transaction ID : SB17.5365</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Steve Waters</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 1505 Leewal Court		Amount of Each Disbursement this Period 2769.26
City Henrico	State VA	
Zip Code 23238	Purpose of Disbursement Payroll - Steve Waters	<b>Transaction ID : SB17.5365.0</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Zachary Werrell</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 420 N 23rd Street		Amount of Each Disbursement this Period 3163.27
City Richmond	State VA	
Zip Code 23223	Purpose of Disbursement Payroll - Zachary Werrell	<b>Transaction ID : SB17.5365.1</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5932.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 49		
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 1 ADP Boulevard		Amount of Each Disbursement this Period 2405.22
City Roseland	State NJ	
Purpose of Disbursement Payroll Taxes - See Memo	Zip Code 07068	<b>Transaction ID : SB17.5368</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. IRS</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 1111 Constitution Ave		Amount of Each Disbursement this Period 836.73
City Washington	State DC	
Purpose of Disbursement Payroll Tax - Withholding Zachary Werrell	Zip Code 20224	<b>Transaction ID : SB17.5368.0</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. IRS</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 1111 Constitution Ave		Amount of Each Disbursement this Period 446.80
City Washington	State DC	
Purpose of Disbursement Payroll Tax - Employer Liability Zachary Werrell	Zip Code 20224	<b>Transaction ID : SB17.5368.1</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2405.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 49			
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. IRS</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 1111 Constitution Ave		Amount of Each Disbursement this Period 730.74
City Washington	State DC	
Zip Code 20224	Purpose of Disbursement Payroll Tax - Withholdings Steve Waters	Transaction ID : SB17.5368.2
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. IRS</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 1111 Constitution Ave		Amount of Each Disbursement this Period 390.95
City Washington	State DC	
Zip Code 20224	Purpose of Disbursement Payroll Tax - Employer Liability Steve Waters	Transaction ID : SB17.5368.3
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 1 ADP Boulevard		Amount of Each Disbursement this Period 110.00
City Roseland	State NJ	
Zip Code 07068	Purpose of Disbursement Payroll fees	Transaction ID : SB17.5144
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	110.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 49			
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. ADP</b>		Date of Disbursement MM / DD / YYYY 03 / 18 / 2014
Mailing Address 1 ADP Boulevard		Amount of Each Disbursement this Period 1676.47
City Roseland	State NJ	
Zip Code 07068	Purpose of Disbursement Payroll Taxes - See Memo	<b>Transaction ID : SB17.5378</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. IRS</b>		Date of Disbursement MM / DD / YYYY 03 / 18 / 2014
Mailing Address 1111 Constitution Ave		Amount of Each Disbursement this Period 552.73
City Washington	State DC	
Zip Code 20224	Purpose of Disbursement Payroll Tax - Withholdings Zachary Werrell	<b>Transaction ID : SB17.5378.0</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. IRS</b>		Date of Disbursement MM / DD / YYYY 03 / 18 / 2014
Mailing Address 1111 Constitution Ave		Amount of Each Disbursement this Period 258.70
City Washington	State DC	
Zip Code 20224	Purpose of Disbursement Payroll Tax - Employer Liability Zachary Werrell	<b>Transaction ID : SB17.5378.1</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1676.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 49			
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. IRS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 1111 Constitution Ave		Amount of Each Disbursement this Period 888.74 Transaction ID : SB17.5378.2
City Washington State DC Zip Code 20224	Purpose of Disbursement Payroll Tax - Withholdings Steve Waters Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. IRS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 1111 Constitution Ave		Amount of Each Disbursement this Period 276.30 Transaction ID : SB17.5378.3
City Washington State DC Zip Code 20224	Purpose of Disbursement Payroll Tax - Employer Liability Steve Waters Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 1 ADP Boulevard		Amount of Each Disbursement this Period 4858.53 Transaction ID : SB17.5383
City Roseland State NJ Zip Code 07068	Purpose of Disbursement Payroll - See Memo Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4858.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 49			
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. Zachary Werrell</b>		Date of Disbursement MM / DD / YYYY 03 / 18 / 2014
Mailing Address 420 N 23rd Street		Amount of Each Disbursement this Period 2447.27
City Richmond	State VA Zip Code 23223	
Purpose of Disbursement Payroll - Zachary Werrell	Category/Type 001	Transaction ID : SB17.5383.0  [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Steve Waters</b>		Date of Disbursement MM / DD / YYYY 03 / 18 / 2014
Mailing Address 1505 Leewal Court		Amount of Each Disbursement this Period 2411.26
City Henrico	State VA Zip Code 23238	
Purpose of Disbursement Payroll - Steve Waters	Category/Type 001	Transaction ID : SB17.5383.1  [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADP</b>		Date of Disbursement MM / DD / YYYY 03 / 28 / 2014
Mailing Address 1 ADP Boulevard		Amount of Each Disbursement this Period 110.00
City Roseland	State NJ Zip Code 07068	
Purpose of Disbursement Payroll fees	Category/Type 001	Transaction ID : SB17.5141
Candidate Name <b>FRIENDS OF DAVE BRAT</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: VA District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	110.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 49			
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. Authorize.net</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address PO Box 8999		Amount of Each Disbursement this Period 484.85 <b>Transaction ID : SB17.5152</b>
City San Francisco	State CA	
Zip Code 94128	Purpose of Disbursement bank fees for credit card contributions	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Authorize.net</b>		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address PO Box 8999		Amount of Each Disbursement this Period 429.31 <b>Transaction ID : SB17.5150</b>
City San Francisco	State CA	
Zip Code 94128	Purpose of Disbursement Bank fees for credit card contributions	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Concentric Direct</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 200 Ashford Center North Suite 500		Amount of Each Disbursement this Period 4000.00 <b>Transaction ID : SB17.5156</b>
City Atlanta	State GA	
Zip Code 30338	Purpose of Disbursement Consulting - General Campaign Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4914.16
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 49	
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. Concentric Direct</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 200 Ashford Center North Suite 500		Amount of Each Disbursement this Period 7172.74
City Atlanta State GA Zip Code 30338	Purpose of Disbursement Consulting - General Campaign Consulting Category/Type 001	
Candidate Name		<b>Transaction ID : SB17.5158</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Crux Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address PO Box 4743		Amount of Each Disbursement this Period 1000.00
City Lynchburg State VA Zip Code 24502	Purpose of Disbursement Consulting - Strategic Planning Consulting Category/Type 001	
Candidate Name		<b>Transaction ID : SB17.5178</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Geno Jezek</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 10800 Wildflower Ln		Amount of Each Disbursement this Period 1190.00
City Lee's Summit State MO Zip Code 64086	Purpose of Disbursement In-kind - Bumper Stickers Category/Type 006	
Candidate Name		<b>Transaction ID : SB17.5330</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9362.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 49			
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. Minutemen Press</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 10188 W Broad Street		Amount of Each Disbursement this Period 1728.90
City Richmond	State VA Zip Code 23060	
Purpose of Disbursement printing - invitations and lapel stickers	Category/Type 006	<b>Transaction ID : SB17.5161</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Minutemen Press</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 10188 W Broad Street		Amount of Each Disbursement this Period 567.62
City Richmond	State VA Zip Code 23060	
Purpose of Disbursement Printing - thank you letters and stickers	Category/Type 006	<b>Transaction ID : SB17.5163</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Henry Moriconi</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 9424 Paigefield Ct		Amount of Each Disbursement this Period 487.53
City Richmond	State VA Zip Code 23229	
Purpose of Disbursement In-kind - Refreshments, Event Set up Fee	Category/Type 007	<b>Transaction ID : SB17.5388</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2784.05
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 49	
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. rVotes, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2014
Mailing Address 1151 Vineyard Road		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.5165</b>
City Saunderstown	State RI	
Zip Code 02874	Purpose of Disbursement Voter Targeting software	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 475 L'Enfant Plaza		Amount of Each Disbursement this Period 490.00 <b>Transaction ID : SB17.5171</b>
City Washington	State DC	
Zip Code 20536	Purpose of Disbursement Stamps	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Virginia State Board of Elections</b>		Date of Disbursement MM / DD / YYYY 03 / 19 / 2014
Mailing Address 1100 Bank Street		Amount of Each Disbursement this Period 3480.00 <b>Transaction ID : SB17.5173</b>
City Richmond	State VA	
Zip Code 23219	Purpose of Disbursement Filing fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5470.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 49			
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 702 SW 8th Street		Amount of Each Disbursement this Period 415.10 <b>Transaction ID : SB17.5167</b>
City Bentonville	State AR	
Purpose of Disbursement Expense Card		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 702 SW 8th Street		Amount of Each Disbursement this Period 87.12 <b>Transaction ID : SB17.5169</b>
City Bentonville	State AR	
Purpose of Disbursement office supplies - containers, markers, safe		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Steve Waters</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 1505 Leewal Court		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.5147</b>
City Henrico	State VA	
Purpose of Disbursement Payroll - addition to ADP Run payroll		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1002.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 49			
	<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)  
**FRIENDS OF DAVE BRAT**

Full Name (Last, First, Middle Initial) <b>A. Zachary Werrell</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 420 N 23rd Street		Amount of Each Disbursement this Period 604.94 <b>Transaction ID : SB17.5203</b>
City Richmond	State VA Zip Code 23223	
Purpose of Disbursement reimbursement - expense card	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wilton House Museum</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 215 S Wilton Road		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.5159</b>
City Richmond	State VA Zip Code 23226	
Purpose of Disbursement rental fee for event	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	604.94
<b>TOTAL</b> This Period (last page this line number only).....	46211.06