

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 124

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 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)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

COLBURN, DAVID, , ,

A.

Mailing Address 600 N. FAIRBANKS COURT #2402

City

CHICAGO

State

IL

Zip Code

60611-5854

FEC ID number of contributing
federal political committee.

C

Name of Employer

CED MANAGEMENT SERVICES

Occupation

FINANCE

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 13 2018

Transaction ID : AA28423074CA74E79A0B

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STEPHENSON, DONNA, , MRS.,

B.

Mailing Address PO BOX 43326

City

ATLANTA

State

GA

Zip Code

30336-0326

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 16 2018

Transaction ID : A1467D361DE9A4A9BB1B

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JACKSON, RICHARD, , ,

C.

Mailing Address 2655 NORTHWINDS PARKWAY

City

ALPHARETTA

State

GA

Zip Code

30009-2280

FEC ID number of contributing
federal political committee.

C

Name of Employer

JACKSON HEALTHCARE

Occupation

COB/CEO

Receipt For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 09 2018

Transaction ID : A4FB63E33D09646F2A03

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

8100.00

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