

**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

GRAVES FOR CONGRESS

ADDRESS (number and street)

2345 GRAND BLVD

STE 2400



Check if different than previously reported. (ACC)

KANSAS CITY

MO

64108

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00359034

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

MO

06

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  
08 / 02 / 2022

in the State of

MO

(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  
07 / 01 / 2022

through

M M / D D / Y Y Y Y  
07 / 13 / 2022

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

BRADSHAW, JEAN, PAUL, , II

Type or Print Name of Treasurer

Signature of Treasurer

BRADSHAW, JEAN, PAUL, , II

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
11 / 02 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 20

Write or Type Committee Name  
GRAVES FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
07 01 2022

To:

M M / D D / Y Y Y Y  
07 13 2022

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....                                              | 21785.00                | 1450935.15                         |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 0.00                    | 2500.00                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 21785.00                | 1448435.15                         |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 33409.14                | 928060.33                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 0.00                    | 10000.00                           |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 33409.14                | 918060.33                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 1130883.29              |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 43683.63                |                                    |

## 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

PAGE 3 / 20

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

GRAVES FOR CONGRESS

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 1 |   | 2 | 0 | 2 | 2 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 3 |   | 2 | 0 | 2 | 2 |

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

12520.00

472260.40

**(ii) Unitemized.....**

2765.00

36929.75

**(iii) TOTAL of contributions from individuals ▶**

15285.00

509190.15

**(b) Political Party Committees.....**

0.00

50.00

**(c) Other Political Committees (such as PACs).....**

6500.00

941695.00

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

21785.00

1450935.15

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

51973.36

**13. LOANS:****(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

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

10000.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

4418.72

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

21785.00

1517327.23

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 20

| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 33409.14                      | 928060.33                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 194000.00                          |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 2500.00                            |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 2500.00                            |
| 21. OTHER DISBURSEMENTS .....                                                | 0.00                          | 162565.00                          |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 33409.14                      | 1287125.33                         |

## **III. CASH SUMMARY**

|                                                                                       |            |
|---------------------------------------------------------------------------------------|------------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 1142507.43 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 21785.00   |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 1164292.43 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 33409.14   |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 1130883.29 |

# **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 20

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**Bailey, William, , ,**

Mailing Address 8753 Lily Ct

City Zionsville State IN Zip Code 46077

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

Name of Employer Retired Occupation Retired

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 10 2022

Transaction ID : SA11AI.9617

Amount of Each Receipt this Period

750.00

☐ Memo Item

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

Mailing Address 15137 Sheedy Rd

City Divernon State IL Zip Code 62530

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

Name of Employer Occupation

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 12 2022

Transaction ID : SA11AI.9604

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

Mailing Address 33 Northridge Dr

City Saint Joseph State MO Zip Code 64506

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

Name of Employer Occupation

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 13 2022

Transaction ID : SA11AI.9654

Amount of Each Receipt this Period

800.00

☐ Memo Item

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

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

2550.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6 OF 20

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

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |                                                                                                                                                                                                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Clark, Kelly, , ,<br>Mailing Address 10448 N Brooklyn Ave<br><br>City Kansas City State MO Zip Code 64155<br><br>FEC ID number of contributing federal political committee. C<br><br>Name of Employer Northpoint Occupation COO<br><br>Receipt For: 2022<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Election Cycle-to-Date ▼<br>2900.00                                        |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>07 12 2022<br>Transaction ID : SA11AI.9606<br><br>Amount of Each Receipt this Period<br>2900.00<br><input type="checkbox"/> Memo Item                                                             |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>WINRED<br>Mailing Address PO BOX 9891<br><br>City ARLINGTON State VA Zip Code 22219<br><br>FEC ID number of contributing federal political committee. C C00694323<br><br>Name of Employer Occupation<br><br>Receipt For: 2022<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Election Cycle-to-Date ▼<br>126958.83                                                                 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>07 11 2022<br>Transaction ID : SA11AI.9606.0<br><br>Amount of Each Receipt this Period<br>2900.00<br><input checked="" type="checkbox"/> Memo Item<br>RECEIVED THROUGH CONDUIT LIMIT NOT AFFECTED |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Gaddy, Herschel, , ,<br>Mailing Address 4602 S Lakewood Dr<br><br>City Saint Joseph State MO Zip Code 64506<br><br>FEC ID number of contributing federal political committee. C<br><br>Name of Employer Occupation<br>Herschel J. Gaddy & Assoc Biochemist / Consultant<br><br>Receipt For: 2022<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Election Cycle-to-Date ▼<br>500.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>07 13 2022<br>Transaction ID : SA11AI.9725<br><br>Amount of Each Receipt this Period<br>500.00<br><input type="checkbox"/> Memo Item                                                              |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  | 3400.00                                                                                                                                                                                                                                       |  |
| <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 PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 20

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**GREENWELL, DONALD, , ,****A.**

Mailing Address 323 N. E. SHERIDAN RD

City

MAYSVILLE

State

MO

Zip Code

64469

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
retiredOccupation  
RETIRED

Receipt For: 2022

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

640.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  |   | 02  |   | 2022        |

Transaction ID : SA11AI.9628

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**WINRED****B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

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

C00694323

Name of Employer

Occupation

Receipt For: 2022

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

124033.83

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  |   | 02  |   | 2022        |

Transaction ID : SA11AI.9628.0

Amount of Each Receipt this Period

20.00

☒ Memo ItemRECEIVED THROUGH CONDUIT LIMIT NOT  
AFFECTED

Full Name (Last, First, Middle Initial)

**OTOE MISSOURIA TRIBE OF OK****C.**

Mailing Address 8151 US-177

City

Red Rock

State

OK

Zip Code

74651

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

Name of Employer

Occupation

Receipt For: 2022

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  |   | 08  |   | 2022        |

Transaction ID : SA11AI.9621

Amount of Each Receipt this Period

2900.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

2920.00

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

FOR LINE NUMBER:  
(check only one)

|          |     |     |     |     |  |    |
|----------|-----|-----|-----|-----|--|----|
| <b>X</b> | 11a | 11b | 11c | 11d |  |    |
|          | 12  | 13a | 13b | 14  |  | 15 |

NAME OF COMMITTEE (In Full)  
GRAVES FOR CONGRESS

A diagram of a rectangular frame structure. It consists of two horizontal beams at the top and bottom, connected by ten vertical supports. The top beam is labeled with '1' above each of its ten supports. The bottom beam is labeled with '2' above each of its ten supports. The vertical supports are numbered 1 through 10 from left to right. The top beam is labeled '1' at its left end, and the bottom beam is labeled '2' at its left end.

FOR LINE NUMBER:  
(check only one)

|   |     |  |     |  |     |  |     |  |    |
|---|-----|--|-----|--|-----|--|-----|--|----|
| X | 11a |  | 11b |  | 11c |  | 11d |  |    |
|   | 12  |  | 13a |  | 13b |  | 14  |  | 15 |

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

FEC Schedule A (Form 3) (Revised 05/2016)

# **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)

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

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

**A.** Full Name (Last, First, Middle Initial)  
BOEHRINGER INGELHEIM USA CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 900 RIDGEBURY ROAD

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>RIDGEFIELD | State<br>CT | Zip Code<br>06877 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00420398

Name of Employer Occupation

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 07 / 11 / 2022          |

Transaction ID : SA11C.9612

Amount of Each Receipt this Period

|         |
|---------|
| 1000.00 |
|---------|

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
CHS INC. POLITICAL ACTION COMMITTEE

Mailing Address 5500 CENEX DRIVE

|                            |             |                   |
|----------------------------|-------------|-------------------|
| City<br>INVER GROVE HEIGHT | State<br>MN | Zip Code<br>55077 |
|----------------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00149104

Name of Employer Occupation

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 07 / 11 / 2022          |

Transaction ID : SA11C.9615

Amount of Each Receipt this Period

|         |
|---------|
| 1000.00 |
|---------|

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
DELTA AIR LINES PAC

Mailing Address 1212 NEW YORK AVENUE, NW  
SUITE 200

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20005 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00104802

Name of Employer Occupation

Receipt For: 2022  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 07 / 11 / 2022          |

Transaction ID : SA11C.9613

Amount of Each Receipt this Period

|         |
|---------|
| 2500.00 |
|---------|

☐ Memo Item

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

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

|         |
|---------|
| 4500.00 |
|---------|

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 20

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE****A.**Mailing Address 2121 CRYSTAL DRIVE  
SUITE 100City  
ARLINGTONState  
VAZip Code  
22202FEC ID number of contributing  
federal political committee.**C** C00303024

Name of Employer

Occupation

Receipt For: 2022

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  |   | 11  |   | 2022        |

Transaction ID : SA11C.9610

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MINEPAC****B.**Mailing Address 101 Constitution Avenue NW  
Suite 500 ECity  
WashingtonState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2022

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  |   | 07  |   | 2022        |

Transaction ID : SA11C.9625

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL COUNCIL OF COAL LESSORS PAC****C.**Mailing Address 101 Constitution Avenue NW  
Suite 500 ECity  
WashingtonState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C** C00109819

Name of Employer

Occupation

Receipt For: 2022

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  |   | 07  |   | 2022        |

Transaction ID : SA11C.9623

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

2000.00

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

6500.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 20

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Cardmember Service**

Mailing Address PO Box 790408

City  
St. LouisState  
MOZip Code  
63179Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 7 |   | 2 | 0 | 2 | 2 |

FEC Identification Number

C

Amount of Each Disbursement this Period

8379.15

Transaction ID : SB17.9594

☐ Memo Item**B. SOUTHWEST AIRLINES**

Mailing Address PO BOX 36647

City  
DALLASState  
TXZip Code  
75235Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 6 |   | 2 | 0 | 2 | 2 |

FEC Identification Number

C

Amount of Each Disbursement this Period

636.60

Transaction ID : SB17.9594.0

☒ Memo Item**C. MARRIOTT DALLAS**

Mailing Address

City  
DALLASState  
TX

Zip Code

Purpose of Disbursement  
TRAVEL ROOM EXPENSE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 7 |   | 2 | 0 | 2 | 2 |

FEC Identification Number

C

Amount of Each Disbursement this Period

233.83

Transaction ID : SB17.9594.1

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8379.15

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 20

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DAVIS FIELD AVIATION**

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
TRAVEL FUEL EXPENSE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 18  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

443.32

Transaction ID : SB17.9594.2

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. LANDRY'S**

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 24  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2735.23

Transaction ID : SB17.9594.3

☒ Memo Item

Full Name (Last, First, Middle Initial)

**c. Capital Grille**

Mailing Address 601 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20004

Purpose of Disbursement  
MEALS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 24  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

688.38

Transaction ID : SB17.9594.4

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 20

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WAL-MART**

Mailing Address 702 SW 8TH ST

City  
BENTONVILLEState  
ARZip Code  
72716Purpose of Disbursement  
SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 07  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

584.16

Transaction ID : SB17.9594.5

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Country Club Bank**

Mailing Address PO BOX 410889

City  
KANSAS CITYState  
MOZip Code  
64141Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 11  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

161.42

Transaction ID : SB17.9590

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ETHOS ADVISORS LLC**

Mailing Address 10603 N DALTON AVE

City  
KANSAS CITYState  
KSZip Code  
64154Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 07  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

3345.13

Transaction ID : SB17.9595

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3506.55

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 20

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FUNDRAISING, INC.**

Mailing Address 800 W 47TH ST

City  
KANSAS CITYState  
MOZip Code  
64112Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 07  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2825.68

Transaction ID : SB17.9592

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FUNDRAISING, INC.**

Mailing Address 800 W 47TH ST

City  
KANSAS CITYState  
MOZip Code  
64112Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 07  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

7549.71

Transaction ID : SB17.9596

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HENRYALAN**Mailing Address 75 S HIGH ST  
STE 4City  
DUBLINState  
OHZip Code  
43017Purpose of Disbursement  
ACCOUNTING & COMPLIANCE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 11  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.9591

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

13375.39

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 20

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. HSP**

Mailing Address 20130 LAKEVIEW CENTER PLAZA

City  
ASHBURNState  
VAZip Code  
20147Purpose of Disbursement  
DIRECT MAIL FUNDRAISING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 13  | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

6669.04

Transaction ID : SB17.9742

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WARREN, JILL, , ,**

Mailing Address 2345 GRAND BLVD

City  
KANSAS CITYState  
MOZip Code  
64108Purpose of Disbursement  
ENTERPRISE CAR RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 07  | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1341.89

Transaction ID : SB17.9597

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
CREDIT CARD PROCESSING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 13  | 2022    |

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

137.12

Transaction ID : SB17.9598

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8148.05

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

33409.14

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 17 OF 20

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**BOYLES MOTORS INC.**

Nature of Debt (Purpose):  
**VEHICLE LEASE**

Mailing Address 204 N MARKET ST

City  
MARYVILLE

State  
MO

Zip Code  
64468

Outstanding Balance Beginning This Period

500.00

Transaction ID : SD10.4101

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**DOWDEN, WILLIAM, , ,**

Nature of Debt (Purpose):  
**RENT FOR NODAWAY CO. REPUBLICAN  
COMM.**

Mailing Address ROUTE 1  
BOX 116

City  
BURLINGTON JUNCTION

State  
MO

Zip Code  
64428

Outstanding Balance Beginning This Period

200.00

Transaction ID : SD10.4103

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**KWRT-AM / KWRT-FM**

Nature of Debt (Purpose):  
**RADIO ADVERTISING**

Mailing Address 1600 RADIO HILL RD

City  
BOONVILLE

State  
MO

Zip Code  
65233

Outstanding Balance Beginning This Period

857.65

Transaction ID : SD10.4105

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

857.65

1) **SUBTOTALS** This Period This Page (optional) .....

1557.65

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 18 OF 20

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**MISSOURI RIGHT TO LIFE PAC**

Nature of Debt (Purpose):  
**MEMBERSHIP LABELS**
Mailing Address **PO BOX 651**
City  
**JEFFERSON CITY**

State  
**MO**

Zip Code  
**65102**

Outstanding Balance Beginning This Period

1087.00

Transaction ID : **SD10.4107**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1087.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**STOR SAFE**

Nature of Debt (Purpose):  
**STORAGE RENTAL**
Mailing Address **1501 BURLINGTON ST**
City  
**KANSAS CITY**

State  
**MO**

Zip Code  
**64116**

Outstanding Balance Beginning This Period

1000.00

Transaction ID : **SD10.4109**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**THE GULA GRAHAM GROUP**

Nature of Debt (Purpose):  
**FUNDRAISING EXPENSES - DISPUTED DEBT**
Mailing Address **499 S CAPITOL ST SW  
STE. 420**
City  
**WASHINGTON**

State  
**DC**

Zip Code  
**20003**

Outstanding Balance Beginning This Period

1495.59

Transaction ID : **SD10.4113**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1495.59

1) **SUBTOTALS** This Period This Page (optional) .....

3582.59

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 19 OF 20

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE GULA GRAHAM GROUP**

Nature of Debt (Purpose):

FUNDRAISING EXPENSES - DISPUTED  
DEBTMailing Address 499 S CAPITOL ST SW  
STE. 420City  
WASHINGTONState  
DCZip Code  
20003

Outstanding Balance Beginning This Period

10804.39

Transaction ID : SD10.4115

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10804.39

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE GULA GRAHAM GROUP**

Nature of Debt (Purpose):

FUNDRAISING EXPENSES - DISPUTED  
DEBTMailing Address 499 S CAPITOL ST SW  
STE. 420City  
WASHINGTONState  
DCZip Code  
20003

Outstanding Balance Beginning This Period

2909.04

Transaction ID : SD10.4117

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2909.04

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE GULA GRAHAM GROUP**

Nature of Debt (Purpose):

FUNDRAISING EXPENSES - DISPUTED  
DEBTMailing Address 499 S CAPITOL ST SW  
STE. 420City  
WASHINGTONState  
DCZip Code  
20003

Outstanding Balance Beginning This Period

22952.20

Transaction ID : SD10.4118

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22952.20

1) **SUBTOTALS** This Period This Page (optional) .....

36665.63

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 20 OF 20

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**THE LUKENS COMPANY**

Nature of Debt (Purpose):  
PRINTING, MAIL, POSTAGE, AND DATA

Mailing Address 2800 S SHIRLINGTON RD  
FLOOR 9

City ARLINGTON State VA Zip Code 22206

Outstanding Balance Beginning This Period

1877.76

Transaction ID : SD10.4111

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1877.76

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

1877.76

2) **TOTALS** This Period (last page this line number only) ▶

43683.63

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

43683.63