

# 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  
Richmond for Congress

ADDRESS (number and street) 1631 Elysian Fields  
Suite 150  
 Check if different than previously reported. (ACC) New Orleans LA 70126

2. **FEC IDENTIFICATION NUMBER** C00451336 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY STATE ZIP CODE STATE DISTRICT  
LA 02

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 04 / 01 / 2014 through M M / D D / Y Y Y Y 06 / 30 / 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 Maple Richmond Gaines

Signature of Treasurer Maple Richmond Gaines [Electronically Filed] Date M M / D D / Y Y Y Y 07 / 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

FEC Form 3 (Revised 02/2003)

PAGE 2 / 91

Write or Type Committee Name  
**Richmond for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	192891.54	932967.27
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	9840.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	192891.54	923127.27
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	70873.81	364074.98
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	630.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	70873.81	363444.98
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>484649.49</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>383.04</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>24446.50</b>	

### 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

**Richmond for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	52850.00	248616.25
(ii) Unitemized.....	1570.00	14719.00
(iii) TOTAL of contributions from individuals ▶	54420.00	263335.25
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	138471.54	669632.02
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	192891.54	932967.27
<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	630.00
<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>	192891.54	933597.27

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	70873.81	364074.98
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	134000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	134000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	5840.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	4000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	9840.00
21. OTHER DISBURSEMENTS .....	19800.00	87745.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	90673.81	595659.98

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	382431.76
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	192891.54
25. SUBTOTAL (add Line 23 and Line 24).....	575323.30
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	90673.81
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	484649.49

**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 91
	<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)  
**Richmond for Congress**

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

Mailing Address 6004 Cairn Ter

City State Zip Code  
Bethesda MD 20817

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

Name of Employer Occupation  
Meridian Hill Strategies Inc. Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 29 / 2014

**Transaction ID : C5591618**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Darren Boykins**

Mailing Address 5524 Vermillion Blvd.

City State Zip Code  
New Orleans LA 70122

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

Name of Employer Occupation  
Park 'N, LLC President and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
790.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : C5644945**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 550 Bienville St

City State Zip Code  
New Orleans LA 70130-2207

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

Name of Employer Occupation  
Ralph Brennan Restaurant Group Restaurateur

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 04 / 2014

**Transaction ID : C5598807**

Amount of Each Receipt this Period  
1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**B. Jeffrey Brooks**

Mailing Address 5625 James Gunnell Ln

City Alexandria State VA Zip Code 22310-1159

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

Name of Employer Adams & Reese, LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2692.57

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : C5590858**

Amount of Each Receipt this Period  
907.43

**B.** Full Name (Last, First, Middle Initial)  
**B. Jeffrey Brooks**

Mailing Address 5625 James Gunnell Ln

City Alexandria State VA Zip Code 22310-1159

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

Name of Employer Adams & Reese, LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2692.57

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : C5590870**

Amount of Each Receipt this Period  
92.57

**C.** Full Name (Last, First, Middle Initial)  
**Ronald V. Burns Sr.**

Mailing Address 6600 Plaza Dr Ste 307

City New Orleans State LA Zip Code 70127-7934

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

Name of Employer Quick Courier Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1505.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2014

**Transaction ID : C5590810**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

**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 91
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Martin Cancienne</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address PO Box 36		<b>Transaction ID : C5590818</b>
City Belle Rose	State LA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer The Livingston Group	Occupation Principal	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) <b>B. Kenneth M. Carter</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 547 Baronne St		<b>Transaction ID : C5644955</b>
City New Orleans	State LA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Attorney	
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>C. Steven Champlin</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 4800 Dexter St NW		<b>Transaction ID : C5591087</b>
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Duberstein Group	Occupation (202) 728-1123	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<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 8 OF 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Steven Champlin**

Mailing Address 4800 Dexter St NW

City Washington State DC Zip Code 20007

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

Name of Employer: Duberstein Group Occupation: (202) 728-1123

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 06 / 09 / 2014

**Transaction ID : C5614176**

Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Gary J. Chouest**

Mailing Address PO Box 310

City Galliano State LA Zip Code 70354

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

Name of Employer: Galliano Marine Service, LLC Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 06 / 30 / 2014

**Transaction ID : C5644967**

Amount of Each Receipt this Period: 2600.00

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

Mailing Address PO Box 310

City Galliano State LA Zip Code 70354

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

Name of Employer: Galliano Marine Service, LLC Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 06 / 30 / 2014

**Transaction ID : C5644968**

Amount of Each Receipt this Period: 2600.00

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

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

6200.00



**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 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jerry Crowder**

Mailing Address 6220 Essex Ct

City State Zip Code  
New Orleans LA 70131-5536

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

Name of Employer Occupation  
Chevron Lab Tech

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C5643854**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Daniel E. Davillier**

Mailing Address 3721 Red Cypress Dr

City State Zip Code  
New Orleans LA 70131-8317

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

Name of Employer Occupation  
Davillier Law Group, LLC Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C5640150**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 725 Girod St

City State Zip Code  
New Orleans LA 70130-3505

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

Name of Employer Occupation  
Self Employed Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C5644948**

Amount of Each Receipt this Period  
1000.00

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

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

2050.00

**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 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Douglas Evans**

Mailing Address 1748 Jackson Ave

City State Zip Code  
New Orleans LA 70113-1542

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

Name of Employer Occupation  
Dryades YMCA President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C5640687**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**James E. Fitzmorris Jr.**

Mailing Address 909 Poydras Street  
Suite 1780

City State Zip Code  
New Orleans LA 70112

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

Name of Employer Occupation  
Fitzmorris & Associates, Inc. President & 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  
 06 / 27 / 2014

**Transaction ID : C5636738**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Warren A. Forstall Jr.**

Mailing Address 320 N. Carrollton Avenue  
Suite 200

City State Zip Code  
New Orleans LA 70119

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

Name of Employer Occupation  
The Law Offices of Chip Forstall Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C5644946**

Amount of Each Receipt this Period  
750.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Diane G. Franco**

Mailing Address 1005 Falcon Rd

City State Zip Code  
Metairie LA 70005

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 09 / 2014

**Transaction ID : C5614177**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 7508 Glendale Rd.

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Occupation  
Thorsen French Advocacy Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C5636734**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO Box 641456

City State Zip Code  
Kenner LA 70064-1456

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

Name of Employer Occupation  
Republic Beverage Company Vice Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 09 / 2014

**Transaction ID : C5614179**

Amount of Each Receipt this Period  
1500.00

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

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

4000.00

**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 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Eugene J. Green**

Mailing Address 4939 St. Roch Ave

City State Zip Code  
New Orleans LA 70122

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

Name of Employer Occupation  
Nationwide Real Estate Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**800.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : C5644952**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Marla Page Grossman**

Mailing Address 7546 Hampden Lane

City State Zip Code  
Bethesda MD 20814

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

Name of Employer Occupation  
American Continental Group Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 21 / 2014**

**Transaction ID : C5632602**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 1319 Newton St

City State Zip Code  
New Orleans LA 70114

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

Name of Employer Occupation  
Hamp's Construction Construction

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 23 / 2014**

**Transaction ID : C5590799**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 91
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ellen Hazeur</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 5121 Easterlyn Circle		<b>Transaction ID : C5644965</b>	
City New Orleans	State LA	Zip Code 70128	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer First City Court	Occupation Clerk		
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>B. Stephen J. Herman</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 820 O'Keefe Ave		<b>Transaction ID : C5667903</b>	
City New Orleans	State LA	Zip Code 70113	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Herman, Herman, Katz & Cotlar	Occupation Partner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3540.00		

Full Name (Last, First, Middle Initial) <b>C. Stephen J. Herman</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 820 O'Keefe Ave		<b>Transaction ID : C5644966</b>	
City New Orleans	State LA	Zip Code 70113	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 900.00	
Name of Employer Herman, Herman, Katz & Cotlar	Occupation Partner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3540.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<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 14 OF 91
	<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	

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)  
**Richmond for Congress**

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

Mailing Address **PO Box 23890**

City **New Orleans** State **LA** Zip Code **70183-0890**

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

Name of Employer **Diversified Group LLC** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : C5630758**

Amount of Each Receipt this Period  
**2600.00**

**B.** Full Name (Last, First, Middle Initial)  
**H. Daniel Hughes**

Mailing Address **PO Box 23890**

City **New Orleans** State **LA** Zip Code **70183-0890**

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

Name of Employer **Diversified Group LLC** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : C5630757**

Amount of Each Receipt this Period  
**2600.00**

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

Mailing Address **12233 Seline Way**

City **Potomac** State **MD** Zip Code **20854-2872**

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

Name of Employer **US Dept of Va** Occupation **Lawyer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C5644007**

Amount of Each Receipt this Period  
**600.00**

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

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

**5800.00**

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

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

FOR LINE NUMBER: PAGE 15 OF 91  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charles Johnson IV**

Mailing Address 5416 Albia Rd

City State Zip Code  
Bethesda MD 20816

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

Name of Employer Occupation  
Akin Gump Strauss Hauer & Feld LLP Partner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : C5591614**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael T Johnson**

Mailing Address 325 Exposition Boulevard

City State Zip Code  
New Orleans LA 70118

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

Name of Employer Occupation  
Advantage Capital Management Corporati Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 14 / 2014

**Transaction ID : C5521866**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO Box 6006

City State Zip Code  
New Orleans LA 70174-6006

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

Name of Employer Occupation  
Orleans Parish District Court Polling Location Administrator

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1430.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C5644944**

Amount of Each Receipt this Period  
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bobby Major Jr.**

Mailing Address **PO Box 84884**

City **Baton Rouge** State **LA** Zip Code **70884-4884**

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

Name of Employer **Major Service Inc** Occupation **President and CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 23 / 2014**

**Transaction ID : C5590807**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Michael McKay**

Mailing Address **1050 Connecticut Ave NW**  
**oor**

City **Washington** State **DC** Zip Code **20036**

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

Name of Employer **Empire Consulting Group** Occupation **Principal**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 29 / 2014**

**Transaction ID : C5591124**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **2301 Esplanade Ave**

City **New Orleans** State **LA** Zip Code **70119-2501**

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

Name of Employer **Mckenna Publishing Co.** Occupation **Newspaper Publisher**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C5643773**

Amount of Each Receipt this Period  
**250.00**

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

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

**1500.00**



**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 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joel G. Meyers**

Mailing Address 37 Lark Street

City State Zip Code  
New Orleans LA 70124

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  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : C5636684**

Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
**James R. Moffett Jr.**

Mailing Address 6969 Whitmore Pl

City State Zip Code  
New Orleans LA 70128-2604

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

Name of Employer Occupation  
GNO, Inc. 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  
06 / 26 / 2014

**Transaction ID : C5644951**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 1301 U Street, NW  
Suite 426

City State Zip Code  
Washington DC 20009

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

Name of Employer Occupation  
SAP National Security Services (SAP NS) National Vice President for Corporate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2014

**Transaction ID : C5590887**

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 18 OF 91
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>Tonia Moore</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 18 Carriage Lane		<b>Transaction ID : C5644943</b>
City New Orleans	State LA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Louisiana Public Health Institute	Occupation Director	Amount of Each Receipt this Period 550.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>Michael F. Nicoladis</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 17 Waverly Place		<b>Transaction ID : C5644947</b>
City Metairie	State LA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer N-Y Associates, Inc.	Occupation Engineer	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	

Full Name (Last, First, Middle Initial) <b>Larry D. Oney</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 161 Jordan Ct		<b>Transaction ID : C5636743</b>
City La Place	State LA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Hammerman & Gainer, Inc.	Occupation CEO	Amount of Each Receipt this Period 2000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2300.00
<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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 19 OF 91

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cherie A. Pinac**

Mailing Address 3154 Coates Crossing

City Baton Rouge State LA Zip Code 70810

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

Name of Employer Hammerman & Gainer, Inc. Occupation Attorney/Chief Operating Officer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C5636750**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jan Schoonmaker**

Mailing Address 147 E Street, SE

City Washington State DC Zip Code 20003

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

Name of Employer Van Scoyoc Occupation Vice President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : C5591121**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 3700 Orleans Ave Apt 4402

City New Orleans State LA Zip Code 70119-4846

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C5644949**

Amount of Each Receipt this Period  
 200.00

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

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

1450.00

**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 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cary Sherman**

Mailing Address 9125 Vendome Dr.

City	State	Zip Code
Bethesda	MD	20817

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

Name of Employer	Occupation
Recording Industry Association of Amer	Chairman, CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C5649284**

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ed M. Shorty Jr.**

Mailing Address 4 Monplaiser Pl

City	State	Zip Code
New Orleans	LA	70114-1385

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

Name of Employer	Occupation
Shorty, Dooley and Hall	Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2014

**Transaction ID : C5590803**

Amount of Each Receipt this Period

1000.00

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

Mailing Address 5049 Cathedral Ave NW

City	State	Zip Code
Washington	DC	20016-2624

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

Name of Employer	Occupation
Ogilvy Government Relations	Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C5636818**

Amount of Each Receipt this Period

500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Keely Thibodeaux**

Mailing Address 5533 Bancroft Dr

City	State	Zip Code
New Orleans	LA	70122

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

Name of Employer	Occupation
Landmark Consulting LLC	Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2014

**Transaction ID : C5590812**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**David Thomas**

Mailing Address 5114 Wehawken Rd

City	State	Zip Code
Bethesda	MD	20816-2225

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

Name of Employer	Occupation
Mehlman Vogel Castagnetti	Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2014

**Transaction ID : C5598808**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 5527 Tinkers Creek Pl

City	State	Zip Code
Clinton	MD	20735

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

Name of Employer	Occupation
National Cable & Telecommunications As	Vice President, Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : C5591096**

Amount of Each Receipt this Period  
500.00

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 91
	<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)  
**Richmond for Congress**

**A. Christopher Treanor**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2200 N Westmoreland Street  
 Unit 420  
 City Arlington State VA Zip Code 22213  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Akin Gump Strauss Hauer & Feld LLP Occupation Associate  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014  
**Transaction ID : C5591599**  
 Amount of Each Receipt this Period  
 250.00

**B. Iam C. Tucker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 Poydras Street  
 Ste. 2775  
 City New Orleans State LA Zip Code 70163-1104  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Integrated Logistical Support, Inc. Occupation President, CEO  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014  
**Transaction ID : C5644961**  
 Amount of Each Receipt this Period  
 600.00

**C. Terry Verigan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4009 W Esplanade Ave N  
 City Metairie State LA Zip Code 70002-3070  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Enterprise Information Systems, LLC Occupation Consultant  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014  
**Transaction ID : C5631533**  
 Amount of Each Receipt this Period  
 500.00

**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 23 OF 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Glenn H. Woods**

Mailing Address 19 Hermitage Court

City State Zip Code  
Destrehan LA 70047

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

Name of Employer Occupation  
Metro Disposal Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : C5663189**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Eric A Wright**

Mailing Address 5931 Durbridge Drive

City State Zip Code  
New Orleans LA 70131

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

Name of Employer Occupation  
Wright McMillian & Moore Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : C5644950**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 8004 Belfast Street

City State Zip Code  
New Orleans LA 70125

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2014

**Transaction ID : C5636761A**

Amount of Each Receipt this Period  
50.00

\* Earmarked Contribution: See Below

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

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

3550.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : C5663189

Refund check in the amount of \$2,300 for excessive contribution was written on 7/11/14.

Form/Schedule:

Transaction ID:



**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 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Actblue Technical Services**

Mailing Address 14 Arrow St

City Cambridge State MA Zip Code 02238-2110

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**160.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 08 / 2014**

**Transaction ID : C5636761AB**

Amount of Each Receipt this Period  
**50.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Tracie L. Washington**

Mailing Address 8004 Belfast Street

City New Orleans State LA Zip Code 70125

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 04 / 2014**

**Transaction ID : C5636765A**

Amount of Each Receipt this Period  
**50.00**

\* Earmarked Contribution: See Below

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

Mailing Address 14 Arrow St

City Cambridge State MA Zip Code 02238-2110

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**160.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 04 / 2014**

**Transaction ID : C5636765AB**

Amount of Each Receipt this Period  
**50.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

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

**50.00**

**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 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tracie L. Washington**

Mailing Address 8004 Belfast Street

City State Zip Code  
New Orleans LA 70125

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 02 / 2014

**Transaction ID : C5636770A**

Amount of Each Receipt this Period  
50.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**Actblue Technical Services**

Mailing Address 14 Arrow St

City State Zip Code  
Cambridge MA 02238-2110

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
160.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 02 / 2014

**Transaction ID : C5636770AB**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**5555 Bullard, LLC**

Mailing Address PO Box 870523

City State Zip Code  
New Orleans LA 70187-0523

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : C5590994**

Amount of Each Receipt this Period  
1000.00

PARTNERSHIP--partners below if itemized

**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 27 OF 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Wade Verges**

Mailing Address 1053 Robert E Lee Blvd

City State Zip Code  
New Orleans LA 70124

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

Name of Employer Occupation  
5630 Crowder, LLC Real Estate Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 28 / 2014

**Transaction ID : C5590997**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
\*

**B.** Full Name (Last, First, Middle Initial)  
**7500 Bullard, L.L.C.**

Mailing Address P.O. Box 870523

City State Zip Code  
New Orleans LA 70187

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1450.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : C5663198**

Amount of Each Receipt this Period  
1350.00

LLC - Members below if itemized. Permissible funds.

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

Mailing Address 1053 Robert E Lee Blvd

City State Zip Code  
New Orleans LA 70124

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

Name of Employer Occupation  
5630 Crowder, LLC Real Estate Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : C5660127**

Amount of Each Receipt this Period  
1350.00

**[MEMO ITEM]**  
\*

**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 28 OF 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John T. Fuller & Associates, LLC**

Mailing Address 909 Poydras Street  
Suite 2270

City State Zip Code  
New Orleans LA 70112

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C5663201**

Amount of Each Receipt this Period  
1000.00

LLC - Members below if itemized. Permissible funds.

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

Mailing Address 650 Poydras Street  
Suite 2615

City State Zip Code  
New Orleans LA 70130

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C5660125**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
\*

**C.** Full Name (Last, First, Middle Initial)  
**Spears & Spears Law Firm**

Mailing Address 1631 Elysian Fields Ave

City State Zip Code  
New Orleans LA 70117

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C5663202**

Amount of Each Receipt this Period  
1000.00

PARTNERSHIP--partners below if itemized

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

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

2000.00

**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 91
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ike Spears**

Mailing Address 1631 Elysian Fields Ave

City State Zip Code  
New Orleans LA 70117

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

Name of Employer Occupation  
Spears & Spears Law Firm Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : C5660126**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
\*

**B.** Full Name (Last, First, Middle Initial)  
**L.V. Brown, LLC**

Mailing Address 7110 Beauvoir Ct

City State Zip Code  
New Orleans LA 70128-2506

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : C5663203**

Amount of Each Receipt this Period  
1000.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 7110 Beauvoir Ct

City State Zip Code  
New Orleans LA 70128

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

Name of Employer Occupation  
Self-Employed Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1040.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : C5663204**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
\*

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 91			
	<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)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**7500 Bullard, L.L.C.**

Mailing Address P.O. Box 870523

City State Zip Code  
New Orleans LA 70187

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C5668328**

Amount of Each Receipt this Period  
100.00

LLC - Members below if itemized. Permissible funds.

**B.** Full Name (Last, First, Middle Initial)  
**Wade Verges**

Mailing Address 1053 Robert E Lee Blvd

City State Zip Code  
New Orleans LA 70124

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

Name of Employer Occupation  
5630 Crowder, LLC Real Estate Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C5663199**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
\*

**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).....

100.00

52850.00

**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 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ABBVIE POLITICAL ACTION COMMITTEE**

Mailing Address **1 N. WAUKEGAN ROAD**

City **North Chicago** State **IL** Zip Code **60064**

FEC ID number of contributing federal political committee. **C C00536573**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 29 / 2014**

**Transaction ID : C5591114**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Acadian Ambulance Employee Federal PAC**

Mailing Address **PO Box 98000**

City **Lafayette** State **LA** Zip Code **70509**

FEC ID number of contributing federal political committee. **C C00335570**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : C5649294**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **800 CONNECTICUT AVENUE NW  
SUITE 600**

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

FEC ID number of contributing federal political committee. **C C00300707**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 28 / 2014**

**Transaction ID : C5580919**

Amount of Each Receipt this Period  
**1000.00**

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Action Committee for Rural Electrification. (ACRE) National Rural Electric Cooperative

Mailing Address 4301 Wilson Boulevard

City State Zip Code  
Arlington VA 22203

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2014

**Transaction ID : C5580918**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
Action Committee for Rural Electrification. (ACRE) National Rural Electric Cooperative

Mailing Address 4301 Wilson Boulevard

City State Zip Code  
Arlington VA 22203

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C5649270**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Adams and Reese PAC**

Mailing Address 20 F St NW  
Ste 500

City State Zip Code  
Washington DC 20001-6703

FEC ID number of contributing federal political committee. **C** C00226472

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : C5580924**

Amount of Each Receipt this Period  
5000.00

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

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

8000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AFL-CIO COPE PAC**

Mailing Address **815-16TH ST NW**

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

FEC ID number of contributing federal political committee. **C C7000112**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 19 / 2014**

**Transaction ID : C5580927**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Aircraft Owners and Pilots PAC**

Mailing Address **421 Aviation Way  
Suite 875 South Bldg**

City **Frederick** State **MD** Zip Code **21701**

FEC ID number of contributing federal political committee. **C C00131185**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C5649318**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**AKIN GUMP STRAUSS HAUER & FELD LLP CIVIC ACTION COMMITTEE (A**

Mailing Address **1333 NEW HAMPSHIRE AVE., NW**

City **WASHINGTON** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00104901**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 29 / 2014**

**Transaction ID : C5591116**

Amount of Each Receipt this Period  
**500.00**

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

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

**2000.00**

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

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

FOR LINE NUMBER: PAGE 34 OF 91  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMEREN FEDERAL POLITICAL ACTION COMMITTEE (AMERENFED PAC)**

Mailing Address 1331 PENNSYLVANIA AVE., NW  
SUITE 500S

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00206136

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C5649259**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Association for Justice PAC**

Mailing Address 777 6th Street, NW  
Suite 200

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : C5625609**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Federation Of Government Employees**

Mailing Address 80 F Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00009936

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2014

**Transaction ID : C5580921**

Amount of Each Receipt this Period  
 1500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Federation Of Government Employees**

Mailing Address 80 F Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00009936

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C5649295**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**American Federation of State County & Municipal Employees PE**

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036-5665

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : C5600033**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Federation of Teachers COPE**

Mailing Address 555 New Jersey Avenue, NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C5662782**

Amount of Each Receipt this Period  
 1500.00

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

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

4000.00

**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 36 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

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

Mailing Address 1201 L STREET, NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : C5632589**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN MARITIME OFFICERS VOLUNTARY POLITICAL ACTION FUND**

Mailing Address PO BOX 66

City DANIA BEACH State FL Zip Code 33004

FEC ID number of contributing federal political committee. **C** C00027532

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : C5580930**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMM**

Mailing Address 25 MASSACHUSETTS AVENUE, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : C5614184**

Amount of Each Receipt this Period  
2000.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Physical Therapy Association PAC**

Mailing Address 1111 North Fairfax St.

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : C5591113**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**APL LIMITED PAC**

Mailing Address 16220 N. SCOTTSDALE RD.  
SUITE 300

City State Zip Code  
SCOTTSDALE AZ 85254

FEC ID number of contributing federal political committee. **C** C00137828

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 05 / 2014

**Transaction ID : C5600114**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Boilermakers-Blacksmiths LEAP**

Mailing Address 2722 Merrilee Dr  
Ste 360

City State Zip Code  
Fairfax VA 22031-4427

FEC ID number of contributing federal political committee. **C** C00005157

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 09 / 2014

**Transaction ID : C5614178**

Amount of Each Receipt this Period  
 1000.00

**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: PAGE 38 OF 91  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Chesapeake Energy Federal PAC**

Mailing Address **PO Box 18576**

City State Zip Code  
**Oklahoma City OK 73154-0576**

FEC ID number of contributing federal political committee. **C C00389288**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**06 09 2014**

**Transaction ID : C5614180**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**CHEVRON EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address **6101 BOLLINGER CANYON ROAD  
ROOM 3400**

City State Zip Code  
**SAN RAMON CA 94583**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4500.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**06 20 2014**

**Transaction ID : C5632513**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**CHICAGO BRIDGE & IRON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address **1050 K STREET, NW  
SUITE 620**

City State Zip Code  
**WASHINGTON DC 20001**

FEC ID number of contributing federal political committee. **C C00104885**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5500.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**06 04 2014**

**Transaction ID : C5600022**

Amount of Each Receipt this Period  
**500.00**

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

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

**2500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CHICAGO BRIDGE & IRON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1050 K STREET, NW  
SUITE 620

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00104885

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2014

**Transaction ID : C5600025**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Chief. Arthur S. Lawson Campaign Account**

Mailing Address 20 Derbes Dr.

City Gretna State LA Zip Code 70053

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C5663197**

Amount of Each Receipt this Period  
1000.00

Permissible Funds

**C.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FE**

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : C5591099**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A. COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FE**

Full Name (Last, First, Middle Initial)  
Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 28 / 2014

**Transaction ID : C5591101**

Amount of Each Receipt this Period  
1000.00

**B. COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (**

Full Name (Last, First, Middle Initial)  
Mailing Address 100 INDIANA AVE., N. W.

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

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

**Transaction ID : C5661515**

Amount of Each Receipt this Period  
1500.00

**C. Common Sense Colorado PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1978

City Denver State CO Zip Code 80201

FEC ID number of contributing federal political committee. **C** C00491936

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 13 / 2014

**Transaction ID : C5614544**

Amount of Each Receipt this Period  
2500.00

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

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

5000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**COX ENTERPRISES PAC (COXPAC) INC.**

Mailing Address 975 F STREET, NW  
SUITE 300

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00477653**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 28 / 2014**

**Transaction ID : C5591102**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**CSX CORPORATION GOOD GOVERNMENT FUND**

Mailing Address 1331 PENNSYLVANIA AVE, NW, STE 560

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00163832**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**6000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C5649305**

Amount of Each Receipt this Period  
**1000.00**

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

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

City WASHINGTON State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

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

**Transaction ID : C5602169**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A. DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL**

Full Name (Last, First, Middle Initial)  
Mailing Address 8400 WESTPARK DRIVE

City MCLEAN State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

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

**Transaction ID : C5600051**

Amount of Each Receipt this Period  
1000.00

**B. DeLoitte & Touche PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 365

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : C5591105**

Amount of Each Receipt this Period  
1000.00

**C. DeLoitte & Touche PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 365

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

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

**Transaction ID : C5600073**

Amount of Each Receipt this Period  
1500.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 43 OF 91  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial)  
DISTRICT NO. 1-PCD, Marine Engineers' Beneficial Assoc. - POLITICAL ACTION FUND (MEBA-PAF)

**A.** Mailing Address 444 NORTH CAPITOL STREET, NW  
SUITE 800

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00279380

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

Transaction ID : C5632567

Amount of Each Receipt this Period  
 2000.00

Full Name (Last, First, Middle Initial)  
DISTRICT NO. 1-PCD, Marine Engineers' Beneficial Assoc. - POLITICAL ACTION FUND (MEBA-PAF)

**B.** Mailing Address 444 NORTH CAPITOL STREET, NW  
SUITE 800

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00279380

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 13 / 2014

Transaction ID : C5632566

Amount of Each Receipt this Period  
 500.00

Full Name (Last, First, Middle Initial)  
**DTE ENERGY CO. PAC - FEDERAL**

**C.** Mailing Address ONE ENERGY PLAZA  
ROOM 1583 WCB

City State Zip Code  
Detroit MI 48226

FEC ID number of contributing federal political committee. **C** C00081547

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 09 / 2014

Transaction ID : C5614187

Amount of Each Receipt this Period  
 1000.00

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

3500.00

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

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

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

FOR LINE NUMBER: PAGE 44 OF 91  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ecolab, Inc.**

Mailing Address 370 WABASH STREET N.

City ST. PAUL State MN Zip Code 55102

FEC ID number of contributing federal political committee. **C** C00101485

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C5636687**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**

Mailing Address 3699 WILSHIRE BLVD., #1290

City LOS ANGELES State CA Zip Code 90010

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : C5625610**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**ENERGY CORPORATION POLITICAL ACTION COMMITTEE (ENPAC)**

Mailing Address 425 WEST CAPITOL AVENUE, STE24B

City LITTLE ROCK State AR Zip Code 72201

FEC ID number of contributing federal political committee. **C** C00363879

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C5636710**

Amount of Each Receipt this Period  
5000.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

A. Full Name (Last, First, Middle Initial)  
**EXXON MOBIL CORPORATION-MOBIL POLITICAL ACTION COMMITTEE**

Mailing Address 5959 LAS COLINAS BLVD  
City IRVING State TX Zip Code 75039

FEC ID number of contributing federal political committee. **C** C00095406

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date 5000.00

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

Transaction ID : C5614181

Amount of Each Receipt this Period  
4000.00

B. Full Name (Last, First, Middle Initial)  
**FOX PAC**

Mailing Address 444 N CAPITOL STREET - SUITE 740  
City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00330019

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

Transaction ID : C5649262

Amount of Each Receipt this Period  
1000.00

C. Full Name (Last, First, Middle Initial)  
**Friends of Wesley Bishop**

Mailing Address 6100 Elysian Fields Ave Suite 200  
City New Orleans State LA Zip Code 70122

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2014

Transaction ID : C5663205

Amount of Each Receipt this Period  
500.00

Permissible Funds

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

5500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GOOGLE INC. GOOGLE NETPAC**

Mailing Address 1001 Pennsylvania Ave. NW  
Suite 600 South Concourse

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00428623

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : C5591117**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**HEWLETT PACKARD COMPANY PAC**

Mailing Address 3000 HANOVER STREET  
MS 1035

City PALO ALTO State CA Zip Code 94304

FEC ID number of contributing federal political committee. **C** C00196725

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2014

**Transaction ID : C5600012**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : C5632564**

Amount of Each Receipt this Period  
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2014

**Transaction ID : C5632565**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**IKARIA POLITICAL ACTION COMMITTEE -AKA- IKAREPAC**

Mailing Address 444 N Capitol St NW  
Ste 830

City Washington State DC Zip Code 20001-1569

FEC ID number of contributing federal political committee. **C** C00463539

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 20 / 2014

**Transaction ID : C5580922**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1101 PENNSYLVANIA AVENUE NW  
SUITE 200

City WASHINGTON State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 15 / 2014

**Transaction ID : C5521792**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

A. Full Name (Last, First, Middle Initial)  
**INTERNATIONAL SHIPHOLDING CORP POLITICAL ACTION COMMITTEE**

Mailing Address **11 N. WATER STREET, SUITE 18290**

City	State	Zip Code
MOBILE	AL	36602

FEC ID number of contributing federal political committee. **C C00327122**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05		29		2014

Transaction ID : **C5591120**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

B. Full Name (Last, First, Middle Initial)  
**JONES WALKER WAECHTER POITEVENT CARRERE & DENEGRE**

Mailing Address **201 ST. CHARLES AVENUE  
49TH FLOOR**

City	State	Zip Code
NEW ORLEANS	LA	70170

FEC ID number of contributing federal political committee. **C C00111534**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 6500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05		19		2014

Transaction ID : **C5580932**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

C. Full Name (Last, First, Middle Initial)  
**JONES WALKER WAECHTER POITEVENT CARRERE & DENEGRE**

Mailing Address **201 ST. CHARLES AVENUE  
49TH FLOOR**

City	State	Zip Code
NEW ORLEANS	LA	70170

FEC ID number of contributing federal political committee. **C C00111534**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 6500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05		19		2014

Transaction ID : **C5580931**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 3500.00
<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 49 OF 91  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JONES WALKER WAECHTER POITEVENT CARRERE & DENE GRE**

Mailing Address 201 ST. CHARLES AVENUE  
49TH FLOOR

City State Zip Code  
NEW ORLEANS LA 70170

FEC ID number of contributing federal political committee. **C** C00111534

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : C5591119**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 2121 CRYSTAL DRIVE  
SUITE 100

City State Zip Code  
ARLINGTON VA 22202

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 09 / 2014

**Transaction ID : C5632562**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 2121 CRYSTAL DRIVE  
SUITE 100

City State Zip Code  
ARLINGTON VA 22202

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : C5649271**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A. MAERSK INC. GOOD GOVERNMENT FUND**

Full Name (Last, First, Middle Initial)  
Mailing Address 1530 WILSON BLVD.  
SUITE 650

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00217471**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 29 / 2014

**Transaction ID : C5591111**

Amount of Each Receipt this Period  
1000.00

**B. Monsanto Company**

Full Name (Last, First, Middle Initial)  
Mailing Address 800 N. LINDBERGH BLVD.

City Saint Louis State MO Zip Code 63167

FEC ID number of contributing federal political committee. **C C00042069**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 27 / 2014

**Transaction ID : C5636741**

Amount of Each Receipt this Period  
2500.00

**C. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00238725**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : C5662789**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF FEDERAL CREDIT UNIONS POLITICAL ACTION COMMITTEE**

Mailing Address **3138 10TH STREET NORTH**

City	State	Zip Code
ARLINGTON	VA	22201

FEC ID number of contributing federal political committee. **C C00040659**

Name of Employer	Occupation

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00
---	---

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05	/	21	/	2014

**Transaction ID : C5600018**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Full Name (Last, First, Middle Initial)  
**National Rural Letter Carriers' Association PAC**

Mailing Address **1630 Duke St Fl 4**

City	State	Zip Code
Alexandria	VA	22314-3467

FEC ID number of contributing federal political committee. **C C00072025**

Name of Employer	Occupation

Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 9000.00
---	---

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06	/	30	/	2014

**Transaction ID : C5649302**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Full Name (Last, First, Middle Initial)  
**NATIONAL TREASURY EMPLOYEES POLITICAL ACTION COMM**

Mailing Address **1750 H Street, NW**

City	State	Zip Code
Washington	DC	20006

FEC ID number of contributing federal political committee. **C C00107128**

Name of Employer	Occupation

Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00
---	---

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06	/	04	/	2014

**Transaction ID : C5600060**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

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

\_\_\_\_\_ 4500.00

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

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 52 OF 91  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NETJETS ASSOCIATION OF SHARED AIRCRAFT PILOTS PAC; NJASAP PAC**

Mailing Address **630 MORRISON ROAD**  
**SUITE 110**

City **GAHANNA** State **OH** Zip Code **43230**

FEC ID number of contributing federal political committee. **C C00488262**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**05 / 09 / 2014**

**Transaction ID : C5632444**

Amount of Each Receipt this Period  
**1500.00**

**B.** Full Name (Last, First, Middle Initial)  
**NUCLEAR ENERGY INSTITUTE FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address **1776 I STREET NW 4TH FLR**

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

FEC ID number of contributing federal political committee. **C C00239848**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**06 / 16 / 2014**

**Transaction ID : C5632577**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**OCCIDENTAL PETROLEUM CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address **10889 WILSHIRE BLVD.**

City **LOS ANGELES** State **CA** Zip Code **90024**

FEC ID number of contributing federal political committee. **C C00083857**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**05 / 30 / 2014**

**Transaction ID : C5600121**

Amount of Each Receipt this Period  
**1000.00**

**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 53 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A. Pan-American Life Insurance Company PAC (PALIC PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 601 POYDRAS ST 12TH FL (LEGAL DEPT)

City NEW ORLEANS	State LA	Zip Code 70130
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00232272

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C5649286**

Amount of Each Receipt this Period  
500.00

**B. PENINSULA PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO	State CA	Zip Code 95814
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00557850

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C5636716**

Amount of Each Receipt this Period  
2000.00

**C. PHILLIPS 66 PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 260 M PLAZA OFFICE BUILDING

City BARTLESVILLE	State OK	Zip Code 74004
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00513549

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : C5632580**

Amount of Each Receipt this Period  
1000.00

**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 54 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2014
A. Mailing Address 317 MASSACHUSETTS AVENUE, NE 1ST FLOOR		Transaction ID : C5580923
City WASHINGTON	State DC Zip Code 20002	
FEC ID number of contributing federal political committee. C C00343137	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000.00	

Full Name (Last, First, Middle Initial) POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2014
B. Mailing Address 317 MASSACHUSETTS AVENUE, NE 1ST FLOOR		Transaction ID : C5662703
City WASHINGTON	State DC Zip Code 20002	
FEC ID number of contributing federal political committee. C C00343137	Amount of Each Receipt this Period 350.00	
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000.00	* In-Kind: Fundraising and Consulting Services

Full Name (Last, First, Middle Initial) POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2014
C. Mailing Address 317 MASSACHUSETTS AVENUE, NE 1ST FLOOR		Transaction ID : C5662777
City WASHINGTON	State DC Zip Code 20002	
FEC ID number of contributing federal political committee. C C00343137	Amount of Each Receipt this Period 1150.00	
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<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 55 OF 91  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial)  
**POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS**

**A.** Mailing Address **317 MASSACHUSETTS AVENUE, NE  
1ST FLOOR**

City **WASHINGTON** State **DC** Zip Code **20002**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**06 / 27 / 2014**

**Transaction ID : C5662779**

Amount of Each Receipt this Period  
**5000.00**

Full Name (Last, First, Middle Initial)  
**POWERPAC OF THE EDISON ELECTRIC INSTITUTE**

**B.** Mailing Address **701 PENNSYLVANIA AVENUE N W**

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

FEC ID number of contributing federal political committee. **C C00095869**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

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

**Transaction ID : C5632551**

Amount of Each Receipt this Period  
**1000.00**

Full Name (Last, First, Middle Initial)  
**PPL PEOPLE FOR GOOD GOVERNMENT**

**C.** Mailing Address **TWO NORTH NINTH STREET  
GENTW2**

City **ALLENTOWN** State **PA** Zip Code **18101**

FEC ID number of contributing federal political committee. **C C00228106**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**06 / 26 / 2014**

**Transaction ID : C5636732**

Amount of Each Receipt this Period  
**1000.00**

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

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

**7000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rapiscan Systems**

Mailing Address 2900 CRYSTAL DRIVE  
SUITE 910

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00414896

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : C5580925**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1100 WILSON BLVD  
SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : C5580929**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1100 WILSON BLVD  
SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : C5591109**

Amount of Each Receipt this Period  
2000.00

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

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

4500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A. Seafarers PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Terry Turner  
 501 Auth Way  
 City Suitland State MD Zip Code 20746  
 FEC ID number of contributing federal political committee. **C C00004325**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 8500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014  
**Transaction ID : C5580928**  
 Amount of Each Receipt this Period  
 2500.00

**B. SEIU Cope Fund**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1800 Massachusetts Ave NW  
 City Washington State DC Zip Code 20036-1222  
 FEC ID number of contributing federal political committee. **C C00004036**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014  
**Transaction ID : C5649300**  
 Amount of Each Receipt this Period  
 3500.00

**C. SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1750 New York Avenue NW  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C C00007542**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014  
**Transaction ID : C5625611**  
 Amount of Each Receipt this Period  
 2500.00

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Shipbuilders Council of America**

Mailing Address **655 FIFTEENTH STREET NW  
SUITE 225**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00374355**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 27 / 2014**

**Transaction ID : C5591093**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**SYNERGY PAC**

Mailing Address **6849 OLD DOMINION DRIVE  
SUITE 222**

City **MCLEAN** State **VA** Zip Code **22101**

FEC ID number of contributing federal political committee. **C C00409623**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 14 / 2014**

**Transaction ID : C5511982**

Amount of Each Receipt this Period  
 1971.54

\* In-Kind: Travel funds

**C.** Full Name (Last, First, Middle Initial)  
**The International Org of Masters Mates & Pilots**

Mailing Address **700 MARITIME BLVD**

City **LINTHICUM HEIGHTS** State **MD** Zip Code **21090**

FEC ID number of contributing federal political committee. **C C00073056**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 14 / 2014**

**Transaction ID : C5580926**

Amount of Each Receipt this Period  
 2500.00

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

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

6471.54

**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 59 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial)  
**THE RECORDING INDUSTRY ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE**

Mailing Address **1025 F STREET NW  
10TH FLOOR**

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

FEC ID number of contributing federal political committee. **C C00009357**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 24 / 2014**

**Transaction ID : C5632607**

Amount of Each Receipt this Period  
**1000.00**

Full Name (Last, First, Middle Initial)  
**TIME WARNER CABLE INC. FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address **901 F STREET, NW  
SUITE 800**

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

FEC ID number of contributing federal political committee. **C C00431551**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 21 / 2014**

**Transaction ID : C5632527**

Amount of Each Receipt this Period  
**1000.00**

Full Name (Last, First, Middle Initial)  
**TIME WARNER INC. PAC**

Mailing Address **800 CONNECTICUT AVE., NW  
SUITE 1200**

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

FEC ID number of contributing federal political committee. **C C00339291**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 23 / 2014**

**Transaction ID : C5668348**

Amount of Each Receipt this Period  
**2000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>4000.00</b>
<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 60 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC**

Mailing Address **601 THIRTEENTH STREET NW  
STE 910 S**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00542365**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : C5667901**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**UA Political Education Committee**

Mailing Address **Three Park Place**

City **Annapolis** State **MD** Zip Code **21401**

FEC ID number of contributing federal political committee. **C C00012476**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : C5649298**

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**United Food and Commercial Workers**

Mailing Address **1775 K St NW**

City **Washington** State **DC** Zip Code **20006-1228**

FEC ID number of contributing federal political committee. **C C00002766**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 28 / 2014**

**Transaction ID : C5649267**

Amount of Each Receipt this Period  
 5000.00

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

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

11000.00

**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 61 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**United Parcel Service Inc. PAC**

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

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

**Transaction ID : C5600028**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1300 I STREET NW SUITE 400 WEST

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00025163

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : C5625607**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1501 M STREET SUITE 1100

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00167759

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C5636736**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

138471.54

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address PO Box 619612 Dallas/Fortworth Airport		Amount of Each Disbursement this Period 865.00
City Dallas	State TX	
Zip Code 75261-9612	Purpose of Disbursement Campaign Travel Expense	Transaction ID : D399823
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address PO Box 619612 Dallas/Fortworth Airport		Amount of Each Disbursement this Period 6.00
City Dallas	State TX	
Zip Code 75261-9612	Purpose of Disbursement Campaign Travel Expense	Transaction ID : D399829
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Angerholzer Broz Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 6500.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Consulting - Fundraising and Compliance	Transaction ID : D399953
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7371.00
<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 63 OF 91			
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Angerholzer Broz Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 6,743.33 <b>Transaction ID : D399954</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign Mailing, Phone and Transportation Expenses	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Angerholzer Broz Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 196.00 <b>Transaction ID : D399955</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign Event Expense	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Angerholzer Broz Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 6,500.00 <b>Transaction ID : D403163</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Consulting - Fundraising and Compliance	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6743.33
<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 64 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Angerholzer Broz Consulting</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014	
Mailing Address 499 S. Capitol St. SW Suite 422			Amount of Each Disbursement this Period 81.98	
City Washington	State DC	Zip Code 20003	Transaction ID : <b>D403164</b>	
Purpose of Disbursement Campaign Office Supplies and Postage		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:				

Full Name (Last, First, Middle Initial) <b>B. Apple</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014	
Mailing Address 3301 Veterans Memorial Blvd			Amount of Each Disbursement this Period 1063.52	
City Metairie	State LA	Zip Code 70002	Transaction ID : <b>D404551</b>	
Purpose of Disbursement Campaign Computer Equipment		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:				

Full Name (Last, First, Middle Initial) <b>C. Armand's Pizza</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014	
Mailing Address 226 Massachusetts Ave. NE			Amount of Each Disbursement this Period 300.35	
City Washington	State DC	Zip Code 20002	Transaction ID : <b>D399817</b>	
Purpose of Disbursement Campaign Food and Beverage Expense		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).....	1445.85
<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 65 OF 91			
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bank of America, N.A.</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 201 Pennsylvania Ave, SE			Amount of Each Disbursement this Period 199.75 <b>Transaction ID : D396021</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Bank Fee		Category/ Type	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Bank of America, N.A.</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 201 Pennsylvania Ave, SE			Amount of Each Disbursement this Period 156.67 <b>Transaction ID : D399925</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Bank Fee		Category/ Type	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Bank of America, N.A.</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 201 Pennsylvania Ave, SE			Amount of Each Disbursement this Period 167.70 <b>Transaction ID : D402857</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Bank Fee		Category/ Type	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	524.12
<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 66 OF 91	
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Barcadia Bar &amp; Grill</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 601 Tchoupitoulas St		Amount of Each Disbursement this Period 281.00 <b>Transaction ID : D402862</b>
City New Orleans	State LA	
Zip Code 70130	Purpose of Disbursement Campaign Food and Beverage Expense	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:	

Full Name (Last, First, Middle Initial) <b>B. Bayou</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2014
Mailing Address 2519 Pennsylvania Ave NW		Amount of Each Disbursement this Period 1556.90 <b>Transaction ID : D403001</b>
City Washington	State DC	
Zip Code 20037	Purpose of Disbursement Campaign Food and Beverage Expense	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:	

Full Name (Last, First, Middle Initial) <b>C. BDPC, LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 02 / 2014
Mailing Address 110 Bellaire Drive		Amount of Each Disbursement this Period 2603.65 <b>Transaction ID : D399832</b>
City New Orleans	State LA	
Zip Code 70124	Purpose of Disbursement Robocalls	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).....	4441.55
<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 67 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Belle Terre Resort And Golf Club</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 111 Fairway Dr		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D399929</b>
City La Place	State LA	
Zip Code 70068-2401	Purpose of Disbursement Event Fee-Golf Tournament	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:	

Full Name (Last, First, Middle Initial) <b>B. Cambria Suites</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 899 O St NW		Amount of Each Disbursement this Period 256.48 <b>Transaction ID : D403002</b>
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Campaign Lodging Expense	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:	

Full Name (Last, First, Middle Initial) <b>c. Catering by Avalon, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 109 Clermont Ave.		Amount of Each Disbursement this Period 772.51 <b>Transaction ID : D402871</b>
City Alexandria	State VA	
Zip Code 22304	Purpose of Disbursement Campaign Food and Beverage Expense	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).....	1528.99
<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 68 OF 91			
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Catering by Avalon, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 109 Clermont Ave.		Amount of Each Disbursement this Period 830.83 <b>Transaction ID : D399814</b>
City Alexandria	State VA	
Zip Code 22304	Purpose of Disbursement Campaign Food and Beverage Expense	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:	

Full Name (Last, First, Middle Initial) <b>B. CCSL</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 2100 Sawmill Road		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : D404703</b>
City Harahan	State LA	
Zip Code 70123	Purpose of Disbursement Donation	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:	

Full Name (Last, First, Middle Initial) <b>c. Courtyard by Marriott</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 1325 2nd St NE		Amount of Each Disbursement this Period 256.48 <b>Transaction ID : D403159</b>
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Campaign Lodging Expense	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).....	1437.31
<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 69 OF 91		
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Crystal Clear Imaging</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1401 Edwards Ave.		Amount of Each Disbursement this Period 417.60 <b>Transaction ID : D399841</b>
City New Orleans	State LA	
Zip Code 70123	Purpose of Disbursement Campaign Printing Expense	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:	

Full Name (Last, First, Middle Initial) <b>B. Custom Apparel Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 2617 Edenborn Ave, Ste B		Amount of Each Disbursement this Period 509.58 <b>Transaction ID : D404301</b>
City Metairie	State LA	
Zip Code 70002	Purpose of Disbursement Campaign Event Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Direct Select Seafood</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 750 Bellemeade Blvd		Amount of Each Disbursement this Period 3676.00 <b>Transaction ID : D402864</b>
City Gretna	State LA	
Zip Code 70056	Purpose of Disbursement Campaign Food and Beverage Expense	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).....	4603.18
<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 70 OF 91			
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Drago's Seafood Restaurant</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 2 Poydras Street			Amount of Each Disbursement this Period 55.91 <b>Transaction ID : D399827</b>
City New Orleans	State LA	Zip Code 70130	
Purpose of Disbursement Campaign Food and Beverage Expense		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: _____		

Full Name (Last, First, Middle Initial) <b>B. English Turn Golf</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 1 Clubhouse Dr			Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D399950</b>
City New Orleans	State LA	Zip Code 70131	
Purpose of Disbursement Campaign Event Expense		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: _____		

Full Name (Last, First, Middle Initial) <b>C. Event Farm</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 1806 T Street, NW			Amount of Each Disbursement this Period 220.00 <b>Transaction ID : D403000</b>
City Washington	State DC	Zip Code 20009	
Purpose of Disbursement Software		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) .....	525.91
<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 71 OF 91			
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Expedia</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014		
Mailing Address 10190 Covington Cross Drive			Amount of Each Disbursement this Period 437.80		
City Las Vegas	State NV	Zip Code 89144	Transaction ID : D399820		
Purpose of Disbursement Campaign Travel Expense		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:					

Full Name (Last, First, Middle Initial) <b>B. Expedia</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014		
Mailing Address 10190 Covington Cross Drive			Amount of Each Disbursement this Period 437.80		
City Las Vegas	State NV	Zip Code 89144	Transaction ID : D399821		
Purpose of Disbursement Campaign Travel Expense		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:					

Full Name (Last, First, Middle Initial) <b>C. Fair Arts Management</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014		
Mailing Address 5339 Prytania Street			Amount of Each Disbursement this Period 1200.00		
City New Orleans	State LA	Zip Code 70115	Transaction ID : D404714		
Purpose of Disbursement Campaign Food and Beverage Expense		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).....	2075.60
<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 72 OF 91		
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Firestone Country Club</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 452 E Warner Rd			Amount of Each Disbursement this Period 269.96 <b>Transaction ID : D403160</b>
City Akron	State OH	Zip Code 44319	
Purpose of Disbursement Campaign Golf Event		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:			

Full Name (Last, First, Middle Initial) <b>B. First NBC Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 210 Baronne Street			Amount of Each Disbursement this Period 15.00 <b>Transaction ID : D402866</b>
City New Orleans	State LA	Zip Code 70112	
Purpose of Disbursement Bank Fee		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:			

Full Name (Last, First, Middle Initial) <b>c. First NBC Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 210 Baronne Street			Amount of Each Disbursement this Period 34.95 <b>Transaction ID : D400640</b>
City New Orleans	State LA	Zip Code 70112	
Purpose of Disbursement Bank Fee		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).....	319.91
<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 73 OF 91		
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. First NBC Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 210 Baronne Street		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D400641</b>
City New Orleans	State LA	
Zip Code 70112	Purpose of Disbursement Bank Fee	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:	

Full Name (Last, First, Middle Initial) <b>B. First NBC Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 210 Baronne Street		Amount of Each Disbursement this Period 15.00 <b>Transaction ID : D399816</b>
City New Orleans	State LA	
Zip Code 70112	Purpose of Disbursement Bank Fee	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:	

Full Name (Last, First, Middle Initial) <b>c. First NBC Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 210 Baronne Street		Amount of Each Disbursement this Period 10.05 <b>Transaction ID : D396019</b>
City New Orleans	State LA	
Zip Code 70112	Purpose of Disbursement Bank Fee	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).....	35.05
<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 74 OF 91			
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. First NBC Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 210 Baronne Street		Amount of Each Disbursement this Period 72.40
City New Orleans	State LA	
Zip Code 70112	Purpose of Disbursement Bank Fee	Transaction ID : D396020
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. First NBC Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 210 Baronne Street		Amount of Each Disbursement this Period 34.95
City New Orleans	State LA	
Zip Code 70112	Purpose of Disbursement Bank Fee	Transaction ID : D399927
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Hilton Hotels Washington</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 1919 Connecticut Avenue, NW		Amount of Each Disbursement this Period 5006.48
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement Campaign Lodging Expense	Transaction ID : D399964
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5113.83
<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 75 OF 91		
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. La Monette Flowers &amp; Gifts</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 2655 Tulane Ave		Amount of Each Disbursement this Period 282.45 <b>Transaction ID : D404594</b>
City New Orleans	State LA	
Zip Code 70119	Purpose of Disbursement Campaign Gifts	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:	

Full Name (Last, First, Middle Initial) <b>B. Lawsons Gourmet Provisions</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 601 13th Street, NW		Amount of Each Disbursement this Period 460.10 <b>Transaction ID : D399832</b>
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Campaign Food and Beverage Expense	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:	

Full Name (Last, First, Middle Initial) <b>c. Mele Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 619 N Tyler St		Amount of Each Disbursement this Period 3046.63 <b>Transaction ID : D399834</b>
City Covington	State LA	
Zip Code 70433-1476	Purpose of Disbursement Campaign Printing Expense	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).....	3789.18
<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 76 OF 91			
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mele Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 619 N Tyler St		Amount of Each Disbursement this Period 3886.27
City Covington	State LA	
Zip Code 70433-1476	Purpose of Disbursement Campaign Printing Expense	<b>Transaction ID : D399835</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mele Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 619 N Tyler St		Amount of Each Disbursement this Period 3968.79
City Covington	State LA	
Zip Code 70433-1476	Purpose of Disbursement Campaign Printing Expense	<b>Transaction ID : D399836</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 30 Ivy Street Southeast		Amount of Each Disbursement this Period 954.97
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Campaign Food and Beverage Expense	<b>Transaction ID : D399825</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8810.03
<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 77 OF 91			
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. National Democratic Club</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 30 Ivy Street Southeast			Amount of Each Disbursement this Period 268.01 <b>Transaction ID : D399948</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Campaign Food and Beverage Expense		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: _____		

Full Name (Last, First, Middle Initial) <b>B. National Democratic Club</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 30 Ivy Street Southeast			Amount of Each Disbursement this Period 606.28 <b>Transaction ID : D403154</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Campaign Food and Beverage Expense		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: _____		

Full Name (Last, First, Middle Initial) <b>c. New Orleans Party Rental</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 2624 Engineers Rd.			Amount of Each Disbursement this Period 243.76 <b>Transaction ID : D399837</b>
City Belle Chasse	State LA	Zip Code 70037	
Purpose of Disbursement Campaign Event Supplies		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).....	1118.05
<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 78 OF 91			
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. NGP Software Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014	
Mailing Address 1225 Eye Street, NW, Ste. 1225			Amount of Each Disbursement this Period 2750.00	
City Washington	State DC	Zip Code 20005	Transaction ID : <b>D399962</b>	
Purpose of Disbursement Fundraising Software		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. NOLA.TV</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014	
Mailing Address 1332 Oretha Castle Haley Blvd.			Amount of Each Disbursement this Period 360.00	
City New Orleans	State LA	Zip Code 70113	Transaction ID : <b>D404862</b>	
Purpose of Disbursement Campaign Ad Blast		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014	
Mailing Address 317 MASSACHUSETTS AVENUE, NE 1ST FLOOR			Amount of Each Disbursement this Period 350.00	
City WASHINGTON	State DC	Zip Code 20002	Transaction ID : <b>D403292</b>	
Purpose of Disbursement Fundraising and Consulting Services		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014	* In-Kind Received	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3460.00
<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 79 OF 91			
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Qdoba Mexican Grill</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014		
Mailing Address 555 11th Strett, NW			Amount of Each Disbursement this Period 293.95		
City Washington	State DC	Zip Code 20004	Transaction ID : <b>D402873</b>		
Purpose of Disbursement Campaign Food and Beverage Expense		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:					

Full Name (Last, First, Middle Initial) <b>B. Ralph's on the Park</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014		
Mailing Address 900 City Park Ave			Amount of Each Disbursement this Period 2289.89		
City New Orleans	State LA	Zip Code 70119	Transaction ID : <b>D403161</b>		
Purpose of Disbursement Campaign Food and Beverage Expense		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:					

Full Name (Last, First, Middle Initial) <b>C. Rib Room New Orleans</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014		
Mailing Address 621 Saint Louis St			Amount of Each Disbursement this Period 620.31		
City New Orleans	State LA	Zip Code 70130-2119	Transaction ID : <b>D399928</b>		
Purpose of Disbursement Campaign Food and Beverage Expense		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).....	3204.15
<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 80 OF 91		
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ruby Lee's LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 46 Old Wild Horse Rd		Amount of Each Disbursement this Period 561.76 <b>Transaction ID : D399822</b>
City Hilton Head Island	State SC	
Zip Code 29926	Purpose of Disbursement Campaign Food and Beverage Expense	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:	

Full Name (Last, First, Middle Initial) <b>B. Ruth's Chris Steak House, New Orleans</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 525 Fulton Street		Amount of Each Disbursement this Period 1527.05 <b>Transaction ID : D399828</b>
City New Orleans	State LA	
Zip Code 70130	Purpose of Disbursement Campaign Food and Beverage Expense	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:	

Full Name (Last, First, Middle Initial) <b>C. Ruth's Chris Steak House, New Orleans</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 525 Fulton Street		Amount of Each Disbursement this Period 130.00 <b>Transaction ID : D399943</b>
City New Orleans	State LA	
Zip Code 70130	Purpose of Disbursement Campaign Food and Beverage Expense	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).....	2218.81
<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 81 OF 91			
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Servint Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 6861 Elm Street 4th Fl		Amount of Each Disbursement this Period 49.00 <b>Transaction ID : D399933</b>
City McLean State VA Zip Code 22101	Purpose of Disbursement Merchant Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Servint Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 6861 Elm Street 4th Fl		Amount of Each Disbursement this Period 49.00 <b>Transaction ID : D399826</b>
City McLean State VA Zip Code 22101	Purpose of Disbursement Merchant Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Servint Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 6861 Elm Street 4th Fl		Amount of Each Disbursement this Period 49.00 <b>Transaction ID : D402874</b>
City McLean State VA Zip Code 22101	Purpose of Disbursement Merchant Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	147.00
<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 82 OF 91			
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. SYNERGY PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 6849 OLD DOMINION DRIVE SUITE 222		Amount of Each Disbursement this Period 1971.54
City MCLEAN	State VA	
Zip Code 22101	Purpose of Disbursement Travel funds	Transaction ID : D394074
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)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The UPS Store</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 1631 Elysian Fields		Amount of Each Disbursement this Period 872.43
City New Orleans	State LA	
Zip Code 70117	Purpose of Disbursement Campaign Mailing Expenses	Transaction ID : D399833
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Turner Pollard Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 444 North Capital Suite 840		Amount of Each Disbursement this Period 4300.00
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Event Tickets, Food and Beverage Expense	Transaction ID : D399949
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7143.97
<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 83 OF 91			
	<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)  
**Richmond for Congress**

**A. US Airways**

Full Name (Last, First, Middle Initial)  
Mailing Address 4000 E.Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement Campaign Travel Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 14 / 2014

Amount of Each Disbursement this Period: 5.00

Transaction ID : D399818

**B. US Airways**

Full Name (Last, First, Middle Initial)  
Mailing Address 4000 E.Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement Campaign Travel Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 14 / 2014

Amount of Each Disbursement this Period: 459.50

Transaction ID : D399819

**c. US Airways**

Full Name (Last, First, Middle Initial)  
Mailing Address 4000 E.Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement Campaign Travel Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 23 / 2014

Amount of Each Disbursement this Period: 771.00

Transaction ID : D402994

**SUBTOTAL** of Disbursements This Page (optional) ..... 1235.50

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 84 OF 91	
	<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)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Washington Hilton</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 02 / 2014</b>
Mailing Address 1919 Connecticut Ave, NW		Amount of Each Disbursement this Period <b>2000.00</b>
City Washington State DC Zip Code 20009	Purpose of Disbursement Campaign Lodging Expense	
Candidate Name	Category/Type	<b>Transaction ID : D402865</b>
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:		

Full Name (Last, First, Middle Initial) <b>B.</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	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>69292.32</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 91
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. BONNIE WATSON COLEMAN FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 180 UPLAND AVENUE		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D404327</b>
City EWING State NJ Zip Code 08638	Purpose of Disbursement Contribution	
Candidate Name <b>BONNIE WATSON COLEMAN</b>		Category/Type
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: NJ District: 12		

Full Name (Last, First, Middle Initial) <b>B. Democratic Congressional Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 430 S Capitol St SE FI 2		Amount of Each Disbursement this Period 15000.00 <b>Transaction ID : D399838</b>
City Washington State DC Zip Code 20003-4024	Purpose of Disbursement Contribution	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Dooky Chase Foundation</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 2301 Orleans Ave.		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D402995</b>
City New Orleans State LA Zip Code 70119	Purpose of Disbursement Donation	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16250.00
<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 86 OF 91			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. George McKenna For School Board 2014</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 4715 Crenshaw Blvd			Amount of Each Disbursement this Period 1100.00 <b>Transaction ID : D400272</b>
City Los Angeles	State CA	Zip Code 90043	
Purpose of Disbursement Contribution		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:			

Full Name (Last, First, Middle Initial) <b>B. John Ehret High School, We the People</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 4300 Patriot St.			Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D400151</b>
City Marrero	State LA	Zip Code 70072	
Purpose of Disbursement Donation		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:			

Full Name (Last, First, Middle Initial) <b>C. Louis Armstrong Summer Jazz Camp</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 124 Roselyn Park Place			Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D402870</b>
City New Orleans	State LA	Zip Code 70131	
Purpose of Disbursement Donation		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).....	1850.00
<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 87 OF 91	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mid-City Baptist Community Fellowship</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 27 / 2014</b>
Mailing Address <b>1252 N Acadian Thruway East Suite A</b>		Amount of Each Disbursement this Period <b>750.00</b> <b>Transaction ID : D403155</b>
City <b>Baton Rouge</b> State <b>LA</b> Zip Code <b>70802</b>	Purpose of Disbursement <b>Donation</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mount Hermon Community Development Outreach Organization</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 26 / 2014</b>
Mailing Address <b>41 Morning Glory Lane</b>		Amount of Each Disbursement this Period <b>250.00</b> <b>Transaction ID : D403290</b>
City <b>Westwego</b> State <b>LA</b> Zip Code <b>70094</b>	Purpose of Disbursement <b>Donation</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>19100.00</b>

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

Transaction ID : L166

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**Cedric L Richmond PERS FUNDS**

**[PERSONAL FUNDS]**

Election: 2008

Primary  
 General  
 Other (specify) ▼

Mailing Address  
7021 Cove Drive

City State ZIP Code  
New Orleans LA 70126

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
100000.00 99000.00 1000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
06 / 29 / 2008 M M / D D / 11/01/2011 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 1000.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Richmond for Congress** Transaction ID : L190

**LOAN SOURCE** Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2008  
**Cedric L Richmond PERS FUNDS**  Primary  
 Mailing Address 7021 Cove Drive  General  
 Other (specify) ▼

City State ZIP Code  
 New Orleans LA 70126

Original Amount of Loan 20000.00	Cumulative Payment To Date 6000.00	Balance Outstanding at Close of This Period 14000.00
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**TERMS**

Date Incurred M 08 / D 29 / Y 2008	Date Due M / D / Y 08/29/2011	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	14000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	15000.00

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Richmond for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>AKPD Message &amp; Media LLC</b>		Nature of Debt (Purpose): Refund-media credits
Mailing Address 730 N Franklin St Ste 404		
City State	Zip Code	
Chicago IL	60654-7205	

Outstanding Balance Beginning This Period	<b>Transaction ID : C3172677</b>	
383.04		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	383.04

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) <b>SUBTOTALS</b> This Period This Page (optional) .....	383.04
2) <b>TOTALS</b> This Period (last page this line number only) .....	383.04
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	383.04

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**Richmond for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Bright Moments</b>	Nature of Debt (Purpose): Consulting - Public Relations
Mailing Address 615 Baronne Street Suite 304	
City State Zip Code New Orleans LA 70113	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="5000.00"/>	<b>Transaction ID : D253059</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="5000.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Deep South Investigations, Inc.</b>	Nature of Debt (Purpose): Investigative Services
Mailing Address 1720 Stumpf Blvd Suite 100	
City State Zip Code Gretna LA 70056	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="1446.50"/>	<b>Transaction ID : D255966</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="1446.50"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Ms Andrea E Dube</b>	Nature of Debt (Purpose): Staff Salary
Mailing Address 4435 Carondelet St.	
City State Zip Code New Orleans LA 70115	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="3000.00"/>	<b>Transaction ID : D253058</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="3000.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<input style="width:100%;" type="text" value="9446.50"/>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<input style="width:100%;" type="text" value="9446.50"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text" value="15000.00"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text" value="24446.50"/>