

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

GRAVES FOR CONGRESS

ADDRESS (number and street)

2345 GRAND BLVD

STE 2400

KANSAS CITY

MO

64108

☐ Check if different  
than previously  
reported. (ACC)

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00359034

3. IS THIS  
REPORT☐ NEW  
(N)

OR

☒ AMENDED  
(A)

STATE ▼ DISTRICT

MO

06

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☒ January 31 Year-End Report (YE)☐ Termination Report (TER)(b) 12-Day **PRE**-Election Report for the:☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M /

D D /

Y Y Y Y

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

through

M M /

D D /

Y Y Y Y

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

BRADSHAW, JEAN PAUL, , ,

Signature of Treasurer

BRADSHAW, JEAN PAUL, , ,

Date

M M /

D D /

Y Y Y Y

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

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**GRAVES FOR CONGRESS**

Report Covering the Period:

From:

MM / DD / YYYY  
10 / 01 / 2023

To:

MM / DD / YYYY  
12 / 31 / 2023

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)) ....                                             | 234429.00               | 1578842.72                         |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 500.00                  | 5000.00                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 233929.00               | 1573842.72                         |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 194825.13               | 950327.86                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 0.00                    | 4996.32                            |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 194825.13               | 945331.54                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 2116724.22              |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 62106.84                |                                    |

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).**

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

GRAVES FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
10 / 01 / 2023

To:

M M / D D / Y Y Y Y  
12 / 31 / 2023**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

90475.00

554156.50

(ii) Unitemized .....

3954.00

33717.25

(iii) TOTAL of contributions  
from individuals ▶

94429.00

587873.75

(b) Political Party Committees.....

0.00

2500.00

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

140000.00

988468.97

(d) The Candidate .....

0.00

0.00

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

234429.00

1578842.72

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

18467.52

18467.52

## 13. LOANS:

(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS  
(add Lines 13(a) and (b)).....

0.00

0.00

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

0.00

4996.32

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

17896.01

61420.88

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

270792.53

1663727.44

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 194825.13                     | 950327.86                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 500.00                        | 2500.00                            |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 2500.00                            |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 500.00                        | 5000.00                            |
| 21. OTHER DISBURSEMENTS .....                                                | 0.00                          | 12500.00                           |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 195325.13                     | 967827.86                          |

## **III. CASH SUMMARY**

|                                                                                       |            |
|---------------------------------------------------------------------------------------|------------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 2041256.82 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 270792.53  |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 2312049.35 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 195325.13  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 2116724.22 |

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

PAGE 5 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BORROWMAN, DAVID, , , JR.

A.

Mailing Address 13581 COUNTY HIGHWAY 11

City

PLEASANT HILL

State

IL

Zip Code

62366-2239

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PERRY WELLS

Occupation

FARMER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 27  |   | 2023        |

Transaction ID : AE8800E8372784C999EB

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BOWEN, MATHEW, , ,

B.

Mailing Address 5514 BELINDER RD

City

FAIRWAY

State

KS

Zip Code

66205-2632

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SUPERIOR BOWEN

Occupation

OWNER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 06  |   | 2023        |

Transaction ID : A49B32957ECDB438091E

Amount of Each Receipt this Period

1000.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

BOWEN, TREY, , ,

C.

Mailing Address 2501 MANCHESTER TRFY

City

KANSAS CITY

State

MO

Zip Code

64129-1381

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SUPERIOR BOWEN

Occupation

OWNER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 06  |   | 2023        |

Transaction ID : ADFBF472BFB594831A2C

Amount of Each Receipt this Period

1000.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED

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

2500.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 6 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BROWN, TUCKER, , ,

**A.**

Mailing Address 4926 MISSION AVE

City

DALLAS

State

TX

Zip Code

75206-6657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SEALY COMPANY

Occupation

ASSOCIATE

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : AA1D9702699B545808B7

Amount of Each Receipt this Period

2500.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

BUBANOVICH, STEPHEN, , ,

**B.**

Mailing Address 740 CARTER 127

City

VAN BUREN

State

MO

Zip Code

63965-7029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HR QUADRI

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A14A1E3CE5DB84FFA938

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHRISTENSEN, THOMAS, , ,

**C.**

Mailing Address 4206 TARA LAKE DR

City

FULTON

State

MO

Zip Code

65251-3752

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHRISTENSEN CONSTRUCTION CO

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A3DD751DFBA9443BF8F3

Amount of Each Receipt this Period

500.00

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

3250.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CUMBER, HUSEIN, , ,

Mailing Address 2325 RIVER RD

City

JACKSONVILLE

State

FL

Zip Code

32207-4014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHIEF STRATEGY OFFICER

Occupation

FLORIDA EAST COAST INDUSTRIES

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 21 |   |   | 2023 |   |   |   |

Transaction ID : A59CE1BCD1C234A23AF6

Amount of Each Receipt this Period

1700.00

☐ Memo Item

A.

Full Name (Last, First, Middle Initial)

CUMBER, HUSEIN, , ,

Mailing Address 2325 RIVER RD

City

JACKSONVILLE

State

FL

Zip Code

32207-4014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHIEF STRATEGY OFFICER

Occupation

FLORIDA EAST COAST INDUSTRIES

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 21 |   |   | 2023 |   |   |   |

Transaction ID : ADEC1560B884141A8B5F

Amount of Each Receipt this Period

3300.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

DELONG, KELSEY, , ,

Mailing Address 209 BURKE PL

City

JEFFERSON CITY

State

MO

Zip Code

65109-5794

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DELONG'S, INC.

Occupation

OWNER

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 07 |   |   | 2023 |   |   |   |

Transaction ID : A490A9DA1F272449F8F9

Amount of Each Receipt this Period

1000.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED

C.

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

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

6000.00

SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS

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

|                                               |                                     |                                     |                                    |                             |
|-----------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------|-----------------------------|
| FOR LINE NUMBER:<br>(check only one)          | PAGE 8 OF 95                        |                                     |                                    |                             |
| <input checked="" type="checkbox"/> 11a<br>12 | <input type="checkbox"/> 11b<br>13a | <input type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)  
GRAVES FOR CONGRESS

|                                                                                                                                                 |             |                                                                  |                                                        |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------------|--------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>DOLNY, BILL, , ,                                                                                     |             |                                                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 12 2023 |  |
| Mailing Address 327 W MOUNTAIN SKY AVE                                                                                                          |             |                                                                  | Transaction ID : A4D93A41B3E7D418BA1F                  |  |
| City<br>PHOENIX                                                                                                                                 | State<br>AZ | Zip Code<br>85045-0416                                           | Amount of Each Receipt this Period<br>500.00           |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>RECEIVED THROUGH CONDUIT WINRED, LIMIT NOT AFFECTED |                                                        |  |
| Name of Employer<br>MEDAIRE, INC.                                                                                                               |             | Occupation<br>CEO                                                |                                                        |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>500.00                                 |                                                        |  |

|                                                                                                                                                 |             |                                                                  |                                                        |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------------|--------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>DOYLE, WILLIAM, , ,                                                                                  |             |                                                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>11 11 2023 |  |
| Mailing Address 955 LEEWARD CT                                                                                                                  |             |                                                                  | Transaction ID : A012A27A0CC9044F78F6                  |  |
| City<br>YORK                                                                                                                                    | State<br>PA | Zip Code<br>17403-4495                                           | Amount of Each Receipt this Period<br>500.00           |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>RECEIVED THROUGH CONDUIT WINRED, LIMIT NOT AFFECTED |                                                        |  |
| Name of Employer<br>DREDGING CONTRACTORS OF AMERICA                                                                                             |             | Occupation<br>CEO                                                |                                                        |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>500.00                                 |                                                        |  |

|                                                                                                                                                 |             |                                                                  |                                                        |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------------|--------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>DUMEY, DANNY, , , JR.                                                                                |             |                                                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 03 2023 |  |
| Mailing Address 26035 US-61                                                                                                                     |             |                                                                  | Transaction ID : A09357245909B4CED857                  |  |
| City<br>BENTON                                                                                                                                  | State<br>MO | Zip Code<br>63736                                                | Amount of Each Receipt this Period<br>1500.00          |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>RECEIVED THROUGH CONDUIT WINRED, LIMIT NOT AFFECTED |                                                        |  |
| Name of Employer<br>DUMEY CONTRACTING, INC.                                                                                                     |             | Occupation<br>PRESIDENT                                          |                                                        |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>1500.00                                |                                                        |  |

|                                                           |         |
|-----------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional).....▶           | 2500.00 |
| 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 PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ERNST, ANDY, , ,

**A.**

Mailing Address 926 KELLY LN

City

NEW HAVEN

State

MO

Zip Code

63068-2719

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PACE CONSTRUCTION

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A909BCFB5F7BC434E89A

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FAISON, JAY, , ,

**B.**

Mailing Address 1355 GREENWOOD CLFS

City

CHARLOTTE

State

NC

Zip Code

28204-2952

FEC ID number of contributing  
federal political committee.

C

Name of Employer

2040 FOUNDATION

Occupation

DIRECTOR

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

Date of Receipt

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

Transaction ID : A60278F781EE142DCBC9

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FAISON, JAY, , ,

**C.**

Mailing Address 1355 GREENWOOD CLFS

City

CHARLOTTE

State

NC

Zip Code

28204-2952

FEC ID number of contributing  
federal political committee.

C

Name of Employer

2040 FOUNDATION

Occupation

DIRECTOR

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

Date of Receipt

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

Transaction ID : AA1359181F904429D8B0

Amount of Each Receipt this Period

2200.00

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

6000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FORBES, ANDREW, , ,

**A.**

Mailing Address 3124 SHADELAND DR

City

FALLS CHURCH

State

VA

Zip Code

22044-1726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CASSIDY ASSOCIATES

Occupation

GOVERNMENT RELATIONS

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 04 |   |   | 2023 |   |   |   |

Transaction ID : AEE1FC0D45AC64FFAA7F

Amount of Each Receipt this Period

500.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

GONZALEZ, ANNIET, , ,

**B.**

Mailing Address 24 TAHITI BEACH ISLAND RD

City

CORAL GABLES

State

FL

Zip Code

33143-6540

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 12 |   |   | 2023 |   |   |   |

Transaction ID : A18516DF6DC2348D6AB6

Amount of Each Receipt this Period

3300.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

GONZALEZ, ANNIET, , ,

**C.**

Mailing Address 24 TAHITI BEACH ISLAND RD

City

CORAL GABLES

State

FL

Zip Code

33143-6540

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 12 |   |   | 2023 |   |   |   |

Transaction ID : A9DEF3E50569F4577ACE

Amount of Each Receipt this Period

3300.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional)..... ▶

7100.00

**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 11 OF 95                |                              |
| (check only one)                        |                              |                              |                              |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                                      | 13a                          | 13b                          | 14                           |
|                                         |                              |                              | 15                           |

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|                                                    |
|----------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br>GRAVES FOR CONGRESS |
|----------------------------------------------------|

|                                                                                                                                                 |             |                                           |                                                        |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------|--------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>GONZALEZ, JOSE, , ,                                                                                  |             |                                           | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>10 21 2023 |  |
| Mailing Address 3200 SW 80TH AVE                                                                                                                |             |                                           | Transaction ID : AC954CBD245A3446D8D6                  |  |
| City<br>MIAMI                                                                                                                                   | State<br>FL | Zip Code<br>33155-3411                    | Amount of Each Receipt this Period<br>2500.00          |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                                 |                                                        |  |
| Name of Employer<br>FLORIDA EAST COAST INDUSTRIES                                                                                               |             | Occupation<br>VP OF CORPORATE DEVELOPMENT |                                                        |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>2500.00         |                                                        |  |

|                                                                                                                                                 |             |                                   |                                                        |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------|--------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>GONZALEZ, RAYMOND, , ,                                                                               |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>10 12 2023 |  |
| Mailing Address 24 TAHITI BEACH ISLAND RD                                                                                                       |             |                                   | Transaction ID : AAB0F87825A94487DAD2                  |  |
| City<br>CORAL GABLES                                                                                                                            | State<br>FL | Zip Code<br>33143-6540            | Amount of Each Receipt this Period<br>3300.00          |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                         |                                                        |  |
| Name of Employer<br>TRANSPORTATION AMERICA                                                                                                      |             | Occupation<br>OWNER               |                                                        |  |
| Receipt For: 2024<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>3300.00 |                                                        |  |

|                                                                                                                                                 |             |                                   |                                                        |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------|--------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>GONZALEZ, RENE, , ,                                                                                  |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>10 12 2023 |  |
| Mailing Address 2766 NW 62ND ST                                                                                                                 |             |                                   | Transaction ID : AA984E4DC23074E7A88E                  |  |
| City<br>MIAMI                                                                                                                                   | State<br>FL | Zip Code<br>33147-7662            | Amount of Each Receipt this Period<br>3300.00          |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                         |                                                        |  |
| Name of Employer                                                                                                                                |             | Occupation                        |                                                        |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>3300.00 |                                                        |  |

|                                                           |         |
|-----------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional).....▶           | 9100.00 |
| 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 PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HAERR, TYLER, , ,

**A.**

Mailing Address 220 COUNTY ROAD 313

City

TAYLOR

State

MO

Zip Code

63471-2050

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HAERR FARMS

Occupation

OWNER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 29 / 2023D D / Y Y Y Y Y  
29 / 2023Y Y Y Y Y  
2023

Transaction ID : A69C64E3DA2384AD6AFB

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HAGUE, KALI, M, ,

**B.**

Mailing Address 1608 34TH ST NW

City

WASHINGTON

State

DC

Zip Code

20007-2710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JETLAW, LLC

Occupation

ATTORNEY

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 11 / 2023D D / Y Y Y Y Y  
11 / 2023Y Y Y Y Y  
2023

Transaction ID : AEB2F7FA3F03948A8A67

Amount of Each Receipt this Period

1000.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

HALLAHAN, KATE, , ,

**C.**Mailing Address 629 CONSTITUTION AVE NE  
APT 304

City

WASHINGTON

State

DC

Zip Code

20002-6086

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TEAM HALLAHAN LLC

Occupation

CONSULTANT

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 11 / 2023D D / Y Y Y Y Y  
11 / 2023Y Y Y Y Y  
2023

Transaction ID : AAA2658407AED468CAE2

Amount of Each Receipt this Period

500.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional)..... ▶

1800.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HARDY, ANGELICA, , ,

**A.**

Mailing Address 2601 BERNADETTE PL

City

COLUMBIA

State

MO

Zip Code

65203-4658

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3400.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 01 |   |   | 2023 |   |   |   |

Transaction ID : A1E1C229D0A8E4076BA6

Amount of Each Receipt this Period

3300.00



Memo Item

RECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**B.**

Full Name (Last, First, Middle Initial)

HARDY, ANGELICA, , ,

Mailing Address 2601 BERNADETTE PL

City

COLUMBIA

State

MO

Zip Code

65203-4658

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3400.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 01 |   |   | 2023 |   |   |   |

Transaction ID : A8EC1CFC90485492BAD6

Amount of Each Receipt this Period

100.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

HARDY, LEE, , ,

Mailing Address 2601 BERNADETTE PL

City

COLUMBIA

State

MO

Zip Code

65203-4658

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HARDY HOLDING GROUP

Occupation

CEO

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 01 |   |   | 2023 |   |   |   |

Transaction ID : A71B6E3A42CFB4145ADF

Amount of Each Receipt this Period

3300.00



Memo Item

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

6700.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HARDY, LEE, , ,

**A.**

Mailing Address 2601 BERNADETTE PL

City

COLUMBIA

State

MO

Zip Code

65203-4658

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HARDY HOLDING GROUP

Occupation

CEO

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

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

Transaction ID : A43608EA7192F427DA9A

Amount of Each Receipt this Period

3300.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**B.**

Full Name (Last, First, Middle Initial)

HARPOLE, CODY, , ,

Mailing Address

City

State

ZZ

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KOELLER FARMS

Occupation

FARMER

Receipt For: 2024

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : AC763D974F7CA46B6AEF

Amount of Each Receipt this Period

250.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

HARPOLE, EDWIN, , ,

Mailing Address 25226 COUNTY HIGHWAY 13

City

NEW CANTON

State

IL

Zip Code

62356-3402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

XTREME MANAGEMENT HUNTS, LLC

Occupation

OWNER

Receipt For: 2024

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A2EC18EB40DC04E6DB7B

Amount of Each Receipt this Period

250.00

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

3800.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HECKLER, ALEXANDER, , ,

**A.**

Mailing Address 3800 NE 1ST AVE

City  
MIAMIState  
FLZip Code  
33137-3604FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LSN PARTNERS, LLCOccupation  
MANAGING PARTNER

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y  
10 11 2023

Transaction ID : AD3A0A6877A5443CDAB1

Amount of Each Receipt this Period

3300.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**B.**

Full Name (Last, First, Middle Initial)

HECKLER, ALEXANDER, , ,

Mailing Address 3800 NE 1ST AVE

City  
MIAMIState  
FLZip Code  
33137-3604FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LSN PARTNERS, LLCOccupation  
MANAGING PARTNER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y  
10 11 2023

Transaction ID : A9909B6DE413742D58B6

Amount of Each Receipt this Period

3300.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**C.**

Full Name (Last, First, Middle Initial)

HOERR, STACY D., , ,

Mailing Address 515 COUNTY ROAD 349

City  
TAYLORState  
MOZip Code  
63471-2024FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STACY D. HOERR, INC.Occupation  
PRESIDENT

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
10 30 2023

Transaction ID : A75F3E74EC0A34A82ADD

Amount of Each Receipt this Period

500.00

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

7100.00

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

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HOWARD, BENJAMIN, , ,

**A.**

Mailing Address 17220 MACDUFF AVE

City

OLNEY

State

MD

Zip Code

20832-2958

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DUBERSTEIN GROUP

Occupation

VP

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 13  |   | 2023        |

Transaction ID : A2C1ECD25D02245C2A07

Amount of Each Receipt this Period

500.00



Memo Item

RECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**B.**

Full Name (Last, First, Middle Initial)

IDEKER, PAUL, , ,

Mailing Address 3022 ASHLAND AVE

City

SAINT JOSEPH

State

MO

Zip Code

64506-1502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

IDEKER INC

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 07  |   | 2023        |

Transaction ID : A6E2397A630A74E84949

Amount of Each Receipt this Period

1000.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

KLINGNER, MICHAEL, , ,

Mailing Address 3007 GLENNVIEW DR

City

QUINCY

State

IL

Zip Code

62305-1505

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KLINGNER &amp; ASSOCIATES, P.C.

Occupation

CIVIL ENGINEER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 30  |   | 2023        |

Transaction ID : A83B9F2C22B5F4D8CB94

Amount of Each Receipt this Period

1000.00



Memo Item

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

2500.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KOELLER, CALVIN, , ,

**A.**

Mailing Address 13287 STOLTE LN

City  
HULLState  
ILZip Code  
62343-3501FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KOELLER FARMSOccupation  
FARMER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 27 2023

Transaction ID : A35539E12675E4CFC87C

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KOELLER, HARRY, , ,

**B.**

Mailing Address 3506 THE COURTS OF WESTVIEW

City  
QUINCYState  
ILZip Code  
62301-6589FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KOELLER FARMSOccupation  
FARMER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 27 2023

Transaction ID : A5EA5F4B0B6EF494A98E

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KOELLER, JAMES, , ,

**C.**

Mailing Address 22239 245TH AVE

City  
NEW CANTONState  
ILZip Code  
62356-3100FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KOELLER FARMSOccupation  
FARMER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 27 2023

Transaction ID : A815021B323524A0CA0C

Amount of Each Receipt this Period

500.00

☐ Memo Item**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LEISMAN, MATTHEW, W, ,

**A.**

Mailing Address 1600 GENESSEE ST

STE 814

City

KANSAS CITY

State

MO

Zip Code

64102-1079

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WESTPORT ADVISORY GROUP, LLC

Occupation

ADVISOR / EQUITY PARTNER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 29  |   | 2023        |

Transaction ID : A44668082E66447F09DF

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LEMUNYON, GLENN B., , ,

**B.**

Mailing Address 1519 BROOKSIDE RD

City

MCLEAN

State

VA

Zip Code

22101-3303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE LEMUNYON GROUP

Occupation

CONSULTING

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 13  |   | 2023        |

Transaction ID : A827126D87F6745EFBA1

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LEVY, ANDREW, , ,

**C.**

Mailing Address 3433 WESTHEIMER RD

City

HOUSTON

State

TX

Zip Code

77027-5415

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AVELO AIRLINES

Occupation

FOUNDER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 05  |   | 2023        |

Transaction ID : AA4795A022F5F4DD79FC

Amount of Each Receipt this Period

1000.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MACLAUGHLIN, JAMES, , ,

**A.** Mailing Address PO BOX 47

City

BUCKNER

State

MO

Zip Code

64016-0047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAMES MACLAUGHLIN LLC

Occupation

CONSULTANT

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 29 |   |   | 2023 |   |   |   |

Transaction ID : AB893E6E295F648818F2

Amount of Each Receipt this Period

25.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**B.** Full Name (Last, First, Middle Initial)  
MACLAUGHLIN, JAMES, , ,

Mailing Address PO BOX 47

City

BUCKNER

State

MO

Zip Code

64016-0047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAMES MACLAUGHLIN LLC

Occupation

CONSULTANT

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 29 |   |   | 2023 |   |   |   |

Transaction ID : A5D404B859303434C9DF

Amount of Each Receipt this Period

25.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**C.** Full Name (Last, First, Middle Initial)  
MACLAUGHLIN, JAMES, , ,

Mailing Address PO BOX 47

City

BUCKNER

State

MO

Zip Code

64016-0047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAMES MACLAUGHLIN LLC

Occupation

CONSULTANT

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 29 |   |   | 2023 |   |   |   |

Transaction ID : AB368D8C79DA34D1991E

Amount of Each Receipt this Period

25.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional)..... ▶

75.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MCINTYRE, MARK, , ,

**A.**

Mailing Address 12006 SE 37TH PL

City

BELLEVUE

State

WA

Zip Code

98006-1152

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MENTE LLC

Occupation

DIRECTOR

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : A89116C1EA4684BBAA6C

Amount of Each Receipt this Period

1500.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

MILLER, DOUGLAS, , ,

**B.**

Mailing Address 307 EAST ST

City

FAIRFAX

State

MO

Zip Code

64446-9112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ADVANCED PORK SYSTEMS

Occupation

OPERATIONS MANAGER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A8572DF1AEC6542BB86E

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MOEN, LINDA, , ,

**C.**

Mailing Address 714 BOROUGHWOOD CIR

City

MANCHESTER

State

MO

Zip Code

63011-4087

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EFK MOEN

Occupation

CIVIL ENGINEER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A9AB9A68C6E504B3490A

Amount of Each Receipt this Period

500.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional)..... ▶

2250.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

NEWTON, LLOYD, , ,

**A.**

Mailing Address 110 LANCASTER BLVD

City

BLUFFTON

State

SC

Zip Code

29909-3136

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A553E34E4C3D84696818

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NORTON, RYAN, , ,

**B.**

Mailing Address 112 E 1083RD LN

City

PAYSON

State

IL

Zip Code

62360-2411

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SNY FARMS INC

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A02A9DEDEA58F41DC865

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PAUL, SHANNON, , ,

**C.**

Mailing Address 628 25TH ST S

City

ARLINGTON

State

VA

Zip Code

22202-2530

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
O'BRIEN, GENTRY SCOTTOccupation  
CONSULTANT

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : AA6968CCFBC3E49B1934

Amount of Each Receipt this Period

500.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

PAULSON, TIMOTHY, , ,

**A.**

Mailing Address 5 MOHAVE DR

City

LAKE WINNEBAGO

State

MO

Zip Code

64034-9308

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EMERY SAPP AND SONS

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 07 |   |   | 2023 |   |   |   |

Transaction ID : A12EDBDBC03B8459E92C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PAUL, TERRY, , ,

**B.**Mailing Address 700 13TH ST NW  
STE 400

City

WASHINGTON

State

DC

Zip Code

20005-6621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CASSIDY &amp; ASSOCIATES

Occupation

CONSULTAND/LOBBYIST

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 12 |   |   | 2023 |   |   |   |

Transaction ID : A5FF740C292FD451A96E

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PAVLUCHUK, JASON, , ,

**C.**

Mailing Address 14317 MEAGAN LOOP

City

GAINESVILLE

State

VA

Zip Code

20155-5947

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PAVLUCHUK AND ASSOCIATES

Occupation

FOUNDER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 18 |   |   | 2023 |   |   |   |

Transaction ID : AEF88BFE2F4524706B2E

Amount of Each Receipt this Period

1500.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional)..... ►

3000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ROBERTSON, COLBY, , ,

**A.**

Mailing Address 1909 S WESTWOOD BLVD

City

POPLAR BLUFF

State

MO

Zip Code

63901-6121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ROBERTSON CONTRACTORS

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 05 |   |   | 2023 |   |   |   |

Transaction ID : A11D0A3A5373942DEB84

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROBERTSON, MICHAEL, , ,

**B.**

Mailing Address PO BOX 661

City

MANSFIELD

State

TX

Zip Code

76063-0661

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCR OIL TOOLS

Occupation

CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 19 |   |   | 2023 |   |   |   |

Transaction ID : A68E444BC5B2C4A9AA89

Amount of Each Receipt this Period

3300.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

SCHEIBAL, JOHN, , ,

**C.**

Mailing Address 8154 GOSHEN RD

City

EDWARDSVILLE

State

IL

Zip Code

62025-6904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EFK MOEN, LLC

Occupation

PROFESSIONAL ENGINEER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 05 |   |   | 2023 |   |   |   |

Transaction ID : AD170EFECB36847FD808

Amount of Each Receipt this Period

250.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional)..... ▶

4550.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SCHNOEBELEN, MARK, , ,

**A.**

Mailing Address 601 HICKORY LN

City

SAINT LOUIS

State

MO

Zip Code

63131-4712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MASSMAN CONSTRUCTION CO.

Occupation

VP

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 06 / 2023D D / Y Y Y Y Y  
06 / 2023Y Y Y Y Y  
2023

Transaction ID : AAD4FBAEF60CC4EC4904

Amount of Each Receipt this Period

250.00



Memo Item

RECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

SCOFIELD, JOHN, , ,

**B.**

Mailing Address 4471 GREENWICH PKWY NW

City

WASHINGTON

State

DC

Zip Code

20007-2010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

S-3 GROUP

Occupation

FOUNDER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 12 / 2023D D / Y Y Y Y Y  
12 / 2023Y Y Y Y Y  
2023

Transaction ID : AC5F417C436134E1E811

Amount of Each Receipt this Period

1000.00



Memo Item

RECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

SMITH, MENLO, , ,

**C.**

Mailing Address 528 UPPER CONWAY CIR

City

CHESTERFIELD

State

MO

Zip Code

63017-2096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 03 / 2023D D / Y Y Y Y Y  
03 / 2023Y Y Y Y Y  
2023

Transaction ID : AC58EDFBE30BA4FB08B9

Amount of Each Receipt this Period

1000.00



Memo Item

2250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STANTON, DAN, , ,

**A.**

Mailing Address 21792 OUTER RD

City

ROCK PORT

State

MO

Zip Code

64482-8470

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 19 2023

Transaction ID : A19210EE419FE4E9C93A

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STAPLETON, THOMAS, , ,

**B.**

Mailing Address 8504 WENDELL DR

City

ALEXANDRIA

State

VA

Zip Code

22308-2158

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STAPLETON ASSOCIATES

Occupation

CONSULTANT

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 21 2023

Transaction ID : A3291F5D6006841418BE

Amount of Each Receipt this Period

500.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

STOKES, DONALD, B., ,

**C.**

Mailing Address 4715 NW COVES DR

City

KANSAS CITY

State

MO

Zip Code

64151-1140

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2023

Transaction ID : AF2B4CE3A30E94C2CA4A

Amount of Each Receipt this Period

250.00

☐ Memo Item**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SUTTER, CLINTON, S, ,

Mailing Address 1416 KIEFERLUND CT

City  
QUINCYState  
ILZip Code  
62305-1095FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LANDMARK IRRIGATION, INC.Occupation  
GENERAL MANAGER/SALESMAN

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 29  |   | 2023        |

Transaction ID : A2C083E8E1BA8498C9B4

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SUTTER, CRAIG, , ,

Mailing Address 29874 STATE HIGHWAY V

City  
MAYWOODState  
MOZip Code  
63454-1319FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LANDMARK IRRIGATIONOccupation  
PROJECT MANAGER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 30  |   | 2023        |

Transaction ID : A1F0C75E9648144CE87D

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SUTTER, DEBRA, , ,

Mailing Address 30989 OLD HIGHWAY 61

City  
TAYLORState  
MOZip Code  
63471-3000FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
FARMER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 29  |   | 2023        |

Transaction ID : A55E71FA32E6D448B9B1

Amount of Each Receipt this Period

500.00

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

1000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SUTTER, ROGER, , ,

**A.**

Mailing Address 6220 COUNTY ROAD 306

City

TAYLOR

State

MO

Zip Code

63471-2007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WILLOW BEND FARM

Occupation

OWNER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : AF87FDF737C624113B9D

Amount of Each Receipt this Period

750.00



Memo Item

Full Name (Last, First, Middle Initial)

TAI, JASON, , ,

**B.**

Mailing Address 410 1ST ST SE

FL 2

City

WASHINGTON

State

DC

Zip Code

20003-1867

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TAI GINSBERG &amp; ASSOCIATES, LLC

Occupation

PRINCIPAL

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A28C5207D7CB04F81B4F

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

WAGY, JAMES, , ,

**C.**

Mailing Address 5950 N OAK TRFY

City

KANSAS CITY

State

MO

Zip Code

64118-5166

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JIM'S MANAGEMENT COMPANY

Occupation

OWNER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A6A805A8DF7DF45B18EE

Amount of Each Receipt this Period

1000.00



Memo Item

RECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional)..... ▶

2750.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WALES, LONNIE, , ,

**A.** Mailing Address 12098 DONOVAN DRCity  
COUNTRY CLUBState  
MOZip Code  
64505-3793FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JD BISHOP

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 07 2023

Transaction ID : A58833A9811A94961857

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WALSH, RICHARD, , ,

**B.** Mailing Address 100 DANBURY RDCity  
RIDGEFIELDState  
CTZip Code  
06877-4107FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HASTINGS COHAN AND WALSH

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 01 2023

Transaction ID : A1C05F189771F419B9B3

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WATERS, MICHAEL, T, , JR.

**C.** Mailing Address 36527 HWY ZCity  
ORRICKState  
MOZip Code  
64077FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MW CONSULTINGOccupation  
PRES

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 30 2023

Transaction ID : A5C3A38884C964727810

Amount of Each Receipt this Period

2000.00

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

4500.00

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

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WEIHS, TYSON, , ,

**A.**

Mailing Address 1265 MOUNTAIN VIEW DR

City  
ASPENState  
COZip Code  
81611-1027FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 12 2023

Transaction ID : A95AEAE11C04F4888A43

Amount of Each Receipt this Period

500.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**B.**

Full Name (Last, First, Middle Initial)

WEST, CHRISTOPHER, , ,

Mailing Address 7206 CORNELL AVE

City  
SAINT LOUISState  
MOZip Code  
63130-3024FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N.B. WEST CONTRACTINGOccupation  
OWNER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 05 2023

Transaction ID : A53BF295EA14043D2BB7

Amount of Each Receipt this Period

500.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**C.**

Full Name (Last, First, Middle Initial)

WILLIAMS, ELIZABETH, H., ,

Mailing Address 2027 SCROGGINS RD

City  
ALEXANDRIAState  
VAZip Code  
22302-3122FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WILLIAMS COMPANYOccupation  
CONSULTANT

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 13 2023

Transaction ID : ADE2499D97E1B4C719DA

Amount of Each Receipt this Period

250.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WIPLINGER, CHARLES, , ,

**A.** Mailing Address 8388 RIVER RD

City

INVER GROVE HEIGHT

State

MN

Zip Code

55076-3451

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WIPAIRE INC.Occupation  
PRESIDENT & COO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 27 |   |   | 2023 |   |   |   |

Transaction ID : A2CEC018CBF7545BD868

Amount of Each Receipt this Period

1000.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT  
NOT AFFECTED

Full Name (Last, First, Middle Initial)

**B.** 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 |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** 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 |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period

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

1000.00

90475.00

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

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AIRCRAFT OWNERS & PILOTS ASSN. PAC-AOPA**

Mailing Address 421 AVIATION WAY

City

FREDERICK

State

MD

Zip Code

21701

FEC ID number of contributing  
federal political committee.**C** C70004585

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 15  |   | 2023        |

Transaction ID : A0B12AD8EA9A84413B38

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMEREN FEDPAC**

Mailing Address 1901 CHOUTEAU AVE

City

SAINT LOUIS

State

MO

Zip Code

63103

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

Name of Employer

Occupation

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 03  |   | 2023        |

Transaction ID : A0624B3161FB94854AFE

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN AIRLINES INC. POLITICAL ACTION COMMITTEE (AAPAC)**Mailing Address 1200 17TH STREET NW  
SUITE 400

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.**C** C00107300

Name of Employer

Occupation

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 01  |   | 2023        |

Transaction ID : A628BCBC7A13D433DB5D

Amount of Each Receipt this Period

2000.00

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

6000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN AIRLINES INC. POLITICAL ACTION COMMITTEE (AAPAC)**Mailing Address 1200 17TH STREET NW  
SUITE 400City  
WASHINGTONState  
DCZip Code  
20036FEC ID number of contributing  
federal political committee.**C** C00107300

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : A204E0A653B574708B91

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN ASSOCIATION OF NURSE ANESTHETI**Mailing Address 412 1ST STREET SE  
SUITE 12City  
WASHINGTONState  
DCZip Code  
20003-1804FEC ID number of contributing  
federal political committee.**C** C00173153

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A7F193E7B6E214A5B8FD

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN BAKERS ASSOCIATION PAC**

Mailing Address 601 PENNSYLVANIA AVE NW

City  
WASHINGTONState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.**C** C00016386

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A5C587D35CE4C438D980

Amount of Each Receipt this Period

2500.00

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

8500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN CAR RENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 584

City

LONG LAKE

State

NY

Zip Code

12847

FEC ID number of contributing  
federal political committee.

C C00612010

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 24 2023

Transaction ID : A0C808D596D714172A6C

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN CONCRETE PAVEMENT ASSN. PAC

Mailing Address 9420 BRYN MAWR AVE  
STE 150

City

ROSEMONT

State

IL

Zip Code

60018-5204

FEC ID number of contributing  
federal political committee.

C C00322727

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2023

Transaction ID : A12758F08F9904D488C8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN CONCRETE PAVEMENT ASSN. PAC

Mailing Address 9420 BRYN MAWR AVE  
STE 150

City

ROSEMONT

State

IL

Zip Code

60018-5204

FEC ID number of contributing  
federal political committee.

C C00322727

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2023

Transaction ID : AA3D2FABDCA504B8FAA7

Amount of Each Receipt this Period

4000.00

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

7500.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN GAS ASSOCIATION PAC

Mailing Address 400 N CAPITOL STREET NW

City

WASHINGTON

State

DC

Zip Code

20001-1511

FEC ID number of contributing  
federal political committee.

C C00007450

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 24 2023

Transaction ID : AA4E50E59DF624D329C8

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 800 10TH STREET NW  
SUITE 400

City

WASHINGTON

State

DC

Zip Code

20001-5189

FEC ID number of contributing  
federal political committee.

C C00106146

Name of Employer

Occupation

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 29 2023

Transaction ID : A73756758E28C46A2824

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN ROLL-ON ROLL-OFF CARRIER GROUP, INC. FREEDOM PAC / ARC FREEDOM PAC

Mailing Address 300 INTERPACE PARKWAY  
BUILDING C, 4TH FLOOR

City

PARSIPPANY

State

NJ

Zip Code

07054

FEC ID number of contributing  
federal political committee.

C C00432963

Name of Employer

Occupation

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 13 2023

Transaction ID : AE46E8846ABA7466CAD8

Amount of Each Receipt this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN WATERWAYS OPERATORS-PAC

Mailing Address 801 N. QUINCY STREET, SUITE 200

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

C C00034678

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 07  |   | 2023        |

Transaction ID : AC001A3A6E8624308AC1

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICA'S ELECTRIC COOPERATIVES PAC

Mailing Address 4301 WILSON BLVD

City

ARLINGTON

State

VA

Zip Code

22203-4419

FEC ID number of contributing  
federal political committee.

C C00002972

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

8000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 03  |   | 2023        |

Transaction ID : A1A159457F7CE4C429A2

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMO VOLUNTARY POLITICAL ACTION

Mailing Address P.O BOX 66

City

DANIA BEACH

State

FL

Zip Code

33004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 13  |   | 2023        |

Transaction ID : A47570ECC46A348488CE

Amount of Each Receipt this Period

2500.00

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

7000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AT&amp;T INC./WARNERMEDIA LLC FEDERAL POLITICAL ACTION COMMITTEE (AT&amp;T/WARNERMEDIA FEDERAL PAC)

**A.**Mailing Address 208 S. AKARD STREET  
SUITE 1812City  
DALLASState  
TXZip Code  
75202FEC ID number of contributing  
federal political committee.**C** C00109017

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 08  |   | 2023        |

Transaction ID : AA30D4440836C4846AF5

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

ATLAS AIR WORLDWIDE HOLDINGS, INC. POLITICAL ACTION COMMITTEE

Mailing Address 2000 WESTCHESTER AVENUE

City  
PURCHASEState  
NYZip Code  
10577FEC ID number of contributing  
federal political committee.**C** C00478099

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 04  |   | 2023        |

Transaction ID : A092B21D6C1D8481C829

Amount of Each Receipt this Period

500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

ATLAS AIR WORLDWIDE HOLDINGS, INC. POLITICAL ACTION COMMITTEE

Mailing Address 2000 WESTCHESTER AVENUE

City  
PURCHASEState  
NYZip Code  
10577FEC ID number of contributing  
federal political committee.**C** C00478099

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 04  |   | 2023        |

Transaction ID : ABAD136C8C89C44DABD9

Amount of Each Receipt this Period

2500.00

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

8000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BLANK ROME LLP PAC

Mailing Address 1825 EYE STREET NW

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

C C00150797

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 07 / 2023D D / Y Y Y Y Y  
07 / 2023Y Y Y Y Y  
2023

Transaction ID : A1EE82BEA3A074F90BF5

Amount of Each Receipt this Period

1000.00



Memo Item

A.

Full Name (Last, First, Middle Initial)

BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)

Mailing Address P.O. BOX 961039

City

FORT WORTH

State

TX

Zip Code

76161

FEC ID number of contributing  
federal political committee.

C C00235739

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 17 / 2023D D / Y Y Y Y Y  
17 / 2023Y Y Y Y Y  
2023

Transaction ID : AFC7AAF9367094902903

Amount of Each Receipt this Period

2500.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

BOMBARDIER AEROSPACE (HOLDINGS) USA INC. PAC (BOMBARDIER PAC)

Mailing Address 1275 PENNSYLVANIA AVE NW SUITE 410

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

C C00546473

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2023D D / Y Y Y Y Y  
13 / 2023Y Y Y Y Y  
2023

Transaction ID : A9BDE5AF7C0D54D45BFF

Amount of Each Receipt this Period

1000.00



Memo Item

C.

4500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CORN REFINERS ASSOCIATION PAC**

Mailing Address 1701 PENNSYLVANIA AVENUE NW

SUITE 400

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.**C** C00554071

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : ACE4DA351633D42E1BF0

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

**CRH AMERICAS, INC. PAC**

Mailing Address 11714 WILSON PARKE AVE

STE 155

City

AUSTIN

State

TX

Zip Code

78726

FEC ID number of contributing  
federal political committee.**C** C00346353

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6500.00

Date of Receipt

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

Transaction ID : A0CDA24044B4C4C9884C

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

**CRH AMERICAS, INC. PAC**

Mailing Address 11714 WILSON PARKE AVE

STE 155

City

AUSTIN

State

TX

Zip Code

78726

FEC ID number of contributing  
federal political committee.**C** C00346353

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : A036064051A3E4BCFB5A

Amount of Each Receipt this Period

3500.00



Memo Item

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

6500.00

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

PAGE 39 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FLORIDA EAST COAST INDUSTRIES, LLC GOOD GOV. COMMITTEE PAC

Mailing Address 700 NW 1ST AVE

City  
MIAMIState  
FLZip Code  
33136FEC ID number of contributing  
federal political committee.

C C00544908

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 05 2023

Transaction ID : A66FC0C301E4A4660AF2

Amount of Each Receipt this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GENERAL DYNAMICS CORP. PAC

Mailing Address 11011 SUNSET HILLS RD

City  
RESTONState  
VAZip Code  
20190-5311FEC ID number of contributing  
federal political committee.

C C00078451

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 15 2023

Transaction ID : AF8585E2E76D946ED8BF

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GENERAL ELECTRIC PAC

Mailing Address 1299 PENNSYLVANIA AVENUE NW

City  
WASHINGTONState  
DCZip Code  
20004-2400FEC ID number of contributing  
federal political committee.

C C00024869

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 18 2023

Transaction ID : A69D9D0705EA940A3B92

Amount of Each Receipt this Period

1000.00

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

7500.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HNTB HOLDINGS LTD. PAC

Mailing Address 28 LIBERTY SHIP WAY, SUITE 2815

City  
SAUSALITOState  
CAZip Code  
94965

Date of Receipt

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

Transaction ID : A0DBCBBE10A5B49D1959

FEC ID number of contributing  
federal political committee.

C C00386029

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

INGRAM BARGE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address ONE BELLE MEADE PL 4400 HARDING RD

City  
NASHVILLEState  
TNZip Code  
37205

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A49B5D528D1F54DAC8FA

FEC ID number of contributing  
federal political committee.

C C00364471

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

INTERNATIONAL UNION OF OPERATING ENGINEERS PAC (EPEC)

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A1F2491A3C2A644A9B4E

FEC ID number of contributing  
federal political committee.

C C70001037

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Amount of Each Receipt this Period

2500.00

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

7000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

JONES WALKER LLP PAC

Mailing Address 201 ST. CHARLES AVE

City

NEW ORLEANS

State

LA

Zip Code

70170

FEC ID number of contributing  
federal political committee.

C C00111534

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A0201673BD065464BB14

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

K&amp;L GATES LLP PAC

Mailing Address 1601 K STREET NW

City

WASHINGTON

State

DC

Zip Code

20006-1682

FEC ID number of contributing  
federal political committee.

C C00213173

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A7C3BAA2449404B7FA67

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LOCKHEED MARTIN EMPLOYEES' PAC

Mailing Address 2121 CRYSTAL DRIVE  
SUITE 100

City

ARLINGTON

State

VA

Zip Code

22202-3706

FEC ID number of contributing  
federal political committee.

C C00303024

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : AD5E44CFA3D08452485F

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)..... ▶

3000.00

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

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LOCKTON INC POLITICAL ACTION COMMITTEE**Mailing Address 444 WEST 47TH STREET  
SUITE 900City  
KANSAS CITYState  
MOZip Code  
64112FEC ID number of contributing  
federal political committee.**C** C00652529

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 12  |   | 2023        |

Transaction ID : AC33250514D2646A39AD

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MARINE FIREMAN'S UNION POLITICAL ACTION FUND**

Mailing Address 240 SECOND STREET

City  
SAN FRANCISCOState  
CAZip Code  
94105FEC ID number of contributing  
federal political committee.**C** C00017244

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 29  |   | 2023        |

Transaction ID : A838203CEC1864AE19C2

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MASTERS, MATES AND PILOTS POLITICAL CONTRIBUTION FUND**

Mailing Address 700 MARITIME BLVD SUITE B

City  
LINTHICUM HEIGHTSState  
MDZip Code  
21090FEC ID number of contributing  
federal political committee.**C** C00073056

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 04  |   | 2023        |

Transaction ID : AB52AE3A9853F41E9A27

Amount of Each Receipt this Period

2500.00

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

7500.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MATSON, INC. FEDERAL ELECTION COMMITTEE****A.**

Mailing Address 555 12TH STREET

8TH FLOOR

City

OAKLAND

State

CA

Zip Code

94607

FEC ID number of contributing  
federal political committee.**C** C00024752

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AAA852E6A5294408C988

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL AGRICULTURAL AVIATION ASSOCIATION PAC****B.**

Mailing Address 1440 DUKE ST

City

ALEXANDRIA

State

VA

Zip Code

22314-3403

FEC ID number of contributing  
federal political committee.**C** C00341701

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A8C8D3F66B6614FDFBF6

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL AIR TRANSPORTATION ASSOCIATION POLITICAL ACTION COMMITTEE****C.**Mailing Address 818 CONNECTICUT AVE, NW  
SUITE 900

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.**C** C00340554

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

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

Transaction ID : A8802E6B3770E4C4C974

Amount of Each Receipt this Period

1500.00

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

7500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE**Mailing Address 4300 WILSON BLVD  
SUITE 800City  
ARLINGTONState  
VAZip Code  
22203FEC ID number of contributing  
federal political committee.**C** C00113241

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 10  |   | 2023        |

Transaction ID : A2A196D4EAC55400684A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE**Mailing Address 1101 KING STREET  
SUITE 600City  
ALEXANDRIAState  
VAZip Code  
22308FEC ID number of contributing  
federal political committee.**C** C00144766

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 02  |   | 2023        |

Transaction ID : A2D8ACD8C80D440FCB4A

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL FUEL GAS COMPANY PAC**

Mailing Address 6363 MAIN ST

City  
WILLIAMSVILLEState  
NYZip Code  
14221-5855FEC ID number of contributing  
federal political committee.**C** C00083758

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 08  |   | 2023        |

Transaction ID : A1A2C12E386CA49F5A62

Amount of Each Receipt this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

NATIONAL SHOOTING SPORTS FOUNDATION, INC. POLITICAL ACTION COMMITTEE (NSSF PAC)

**A.**

Mailing Address 400 N. CAPITOL STREET NW

SUITE 475

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00480863

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 24  |   | 2023        |

Transaction ID : A91EDEF0704C04FB59F6

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

NATIONAL TELECOMMUNICATIONS COOPERATIVE ASSOCIATION RURAL BROADBAND

Mailing Address 4121 WILSON BLVD

STE 1000

City

ARLINGTON

State

VA

Zip Code

22203-4145

FEC ID number of contributing  
federal political committee.**C** C00004473

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 22  |   | 2023        |

Transaction ID : A085FF015D36A495AAE1

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

NETJETS ASSOCIATION OF SHARED AIRCRAFT PILOTS PAC; NJASAP PAC

Mailing Address 2740 AIRPORT DRIVE

SUITE 330

City

COLUMBUS

State

OH

Zip Code

43219

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

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 02  |   | 2023        |

Transaction ID : ACD8B4DB58A8A4703B70

Amount of Each Receipt this Period

2500.00

☐ Memo Item**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

NFIB SAFE TRUST PAC

**A.**

Mailing Address 1201 F STREET NW

SUITE 200

City

WASHINGTON

State

DC

Zip Code

20004-1221

FEC ID number of contributing  
federal political committee.**C** C00101105

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 29  |   | 2023        |

Transaction ID : AC67728EDAF464545A63

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

NMHC PAC

**B.**

Mailing Address 1775 EVE ST NW STE 1100

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.**C** C00130773

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 07  |   | 2023        |

Transaction ID : A0A2E496A17264DF7BE5

Amount of Each Receipt this Period

2000.00



Memo Item

Full Name (Last, First, Middle Initial)

NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND

**C.**

Mailing Address ONE CONSTITUTION AVE NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.**C** C00009282

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 14  |   | 2023        |

Transaction ID : AB57633E70D154281AA6

Amount of Each Receipt this Period

5000.00



Memo Item

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

8000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**OUTDOOR ADVERTISING PAC**

Mailing Address 1850 M STREET, N.W. #1040

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.**C** C00045781

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 06  |   | 2023        |

Transaction ID : A565BE48D615A40BCA0B

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**OVERAIR, INC. POLITICAL ACTION COMMITTEE (OVERAIR PAC)**

Mailing Address 3001 S SUSAN ST.

City

SANTA ANA

State

CA

Zip Code

92704

FEC ID number of contributing  
federal political committee.**C** C00838961

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 06  |   | 2023        |

Transaction ID : AB90F5DCA5A8D4885B60

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**PASS PAC**

Mailing Address 1200 G ST NW SUITE 750

City

WASHINGTON

State

DC

Zip Code

20005

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

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 03  |   | 2023        |

Transaction ID : A97DF96B1D6CE4E68B78

Amount of Each Receipt this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SCALISE FOR CONGRESS

**A.**

Mailing Address PO BOX 23219

City

NEW ORLEANS

State

LA

Zip Code

70183

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : AAB709D86D1A14CB4A6C

Amount of Each Receipt this Period

2000.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

SCHNEIDER NATIONAL INC., TRANSPAC

Mailing Address 3101 S PACKERLAND DRIVE  
PO BOX 1475

City

GREEN BAY

State

WI

Zip Code

54305

FEC ID number of contributing  
federal political committee.

C

C00563924

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID : AE82030656C504F0FA70

Amount of Each Receipt this Period

5000.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

SHIFT5 POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 30844

City

BETHESDA

State

MD

Zip Code

20824

FEC ID number of contributing  
federal political committee.

C

C00830570

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A10D9B6A0D2BD4686A69

Amount of Each Receipt this Period

700.00



Memo Item

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

7700.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SHIFT5 POLITICAL ACTION COMMITTEE

**A.**

Mailing Address PO BOX 30844

City

BETHESDA

State

MD

Zip Code

20824

FEC ID number of contributing  
federal political committee.**C** C00830570

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 16  |   | 2023        |

Transaction ID : A58766B7F917042C5BBD

Amount of Each Receipt this Period

1800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SIEMENS CORPORATION PAC

**B.**Mailing Address 300 NEW JERSEY AVENUE, NW  
SUITE 1000

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00353797

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 03  |   | 2023        |

Transaction ID : A90B4DCD73B8D4E7D8AA

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SOUTHERN STATES PAC

**C.**

Mailing Address POST OFFICE BOX 905

City

TUPELO

State

MS

Zip Code

38802

FEC ID number of contributing  
federal political committee.**C** C00778308

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 03  |   | 2023        |

Transaction ID : AD43E11FF1CAB404488F

Amount of Each Receipt this Period

1000.00

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

5300.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 50 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STUPP BROS. INC. PAC

Mailing Address 3800 WEBER RD

City

SAINT LOUIS

State

MO

Zip Code

63125-1160

FEC ID number of contributing  
federal political committee.

C C00554097

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 06 / 2023

06

2023

Transaction ID : AC0D2A853E7F94F00B18

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C C00467431

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 28 / 2023

28

2023

Transaction ID : A1678DB5778424E84992

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE WILLIAMS COMPANIES, INC. POLITICAL ACTION COMMITTEE

Mailing Address ONE WILLIAMS CENTER 47TH FLOOR

City

TULSA

State

OK

Zip Code

74172

FEC ID number of contributing  
federal political committee.

C C00040394

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 03 / 2023

03

2023

Transaction ID : ACF6661EC9437451693F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

7000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

TOYOTA MOTOR NORTH AMERICA, INC POLITICAL ACTION COMMITTEE (TOYOTA/LEXUS PAC)

**A.**

Mailing Address 325 7TH STREET, NW, SUITE 1000

City

WASHINGTON

State

DC

Zip Code

20004

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

C00542365

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 16 2023

Transaction ID : ABC3C4A2AB17C4D41B25

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

TYSON FOODS INC POLITICAL ACTION COMMITTEE (TYPAC)

Mailing Address PO BOX 2020

City

SPRINGDALE

State

AR

Zip Code

72765

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

C00169821

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 03 2023

Transaction ID : AB306884500F442E192D

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

UNITED AIRLINES, INC. POLITICAL ACTION COMMITTEE (UAPAC)

Mailing Address 233 S. WACKER  
HDQGV

City

CHICAGO

State

IL

Zip Code

60606

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

C00101766

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 03 2023

Transaction ID : A1A78B23F0B324BF5B24

Amount of Each Receipt this Period

2000.00

☐ Memo Item**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 52 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

VERIZON COMMUNICATIONS, INC. POLITICAL ACTION COMMITTEE (VERIZON PAC)

**A.**Mailing Address 1300 I ST NW, STE 500 EAST  
ATTN: TAYLOR CRAIGCity  
WASHINGTONState  
DCZip Code  
20005FEC ID number of contributing  
federal political committee.**C** C00186288

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 02  |   | 2023        |

Transaction ID : AE85852E67DDB40EFAF3

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

VNA HOLDING INC. POLITICAL ACTION COMMITTEE (VG PAC)

**B.**Mailing Address 2900 K STREET NW  
SOUTH BUILDING, SUITE 410City  
WASHINGTONState  
DCZip Code  
20007FEC ID number of contributing  
federal political committee.**C** C00652701

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 01  |   | 2023        |

Transaction ID : AE25288C281F94941878

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

VULCAN MATERIALS COMPANY PAC

**C.**

Mailing Address PO BOX 385014

City  
BIRMINGHAMState  
ALZip Code  
35238-5014FEC ID number of contributing  
federal political committee.**C** C00116020

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 29  |   | 2023        |

Transaction ID : A2AB33FE1A0A94A538D7

Amount of Each Receipt this Period

2500.00

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

6000.00

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

PAGE 53 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WOOLPERT, INC. PAC

**A.**

Mailing Address 4454 IDEA CENTER BLVD

City

BEAVERCREEK

State

OH

Zip Code

45430-1500

FEC ID number of contributing  
federal political committee.**C** C00479899

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 14 |   |   | 2023 |   |   |   |

Transaction ID : A62975AFB88B740728E9

Amount of Each Receipt this Period

2000.00



Memo Item

Full Name (Last, First, Middle Initial)

**B.**

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 |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period



Memo Item

Full Name (Last, First, Middle Initial)

**C.**

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 |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period



Memo Item

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

2000.00

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

140000.00

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

PAGE 54 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SAM GRAVES VICTORY FUND

Mailing Address 2345 GRAND BLVD

STE 1800

City

KANSAS CITY

State

MO

Zip Code

64108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary☐ General☒ Other (specify) ▼

OTHER

Election Cycle-to-Date ▼

18467.52

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 9 | / | 2 | 0 | 2 | 3 |

Transaction ID : AEB65785724314578A14

Amount of Each Receipt this Period

18467.52

☐ Memo Item

A.

Full Name (Last, First, Middle Initial)

NATIONAL AIR TRANSPORTATION ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 818 CONNECTICUT AVE, NW

SUITE 900

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

C

C00340554

Name of Employer

Occupation

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | / | 1 | 0 | / | 2 | 0 | 2 | 3 |

Transaction ID : A3C755288B295467EBE1

Amount of Each Receipt this Period

3000.00

☒ Memo Item

B.

Full Name (Last, First, Middle Initial)

GENERAL AVIATION MANUFACTURERS ASSOCIATION PAC

Mailing Address 1400 K STREET NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

C00014878

Name of Employer

Occupation

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | / | 1 | 0 | / | 2 | 0 | 2 | 3 |

Transaction ID : AD26D5DF9C3A94E9E826

Amount of Each Receipt this Period

3000.00

☒ Memo Item

C.

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

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

18467.52

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

PAGE 55 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**GENERAL AVIATION MANUFACTURERS ASSOCIATION PAC**

Mailing Address 1400 K STREET NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00014878

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 24 2023

Transaction ID : A732B058E34FB4BC1A82

Amount of Each Receipt this Period

2000.00



Memo Item

Full Name (Last, First, Middle Initial)

**BUSCH, AUGUST A., , ,**

Mailing Address 1 BUSCH PL

City

SAINT LOUIS

State

MO

Zip Code

63118-1849

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

Name of Employer

ANHEUSER-BUSCH COMPANIES, INC.

Occupation

PRESIDENT

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 31 2023

Transaction ID : A09966D450FD34F3BAB6

Amount of Each Receipt this Period

3300.00



Memo Item

Full Name (Last, First, Middle Initial)

**BUSCH, AUGUST A., , ,**

Mailing Address 1 BUSCH PL

City

SAINT LOUIS

State

MO

Zip Code

63118-1849

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

Name of Employer

ANHEUSER-BUSCH COMPANIES, INC.

Occupation

PRESIDENT

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 31 2023

Transaction ID : A566371DF39F1401D98B

Amount of Each Receipt this Period

3300.00



Memo Item

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WITZIG, JOHN, , ,

Mailing Address 205 JANE CHAPMAN DR E

City  
NEWTOWNState  
PAZip Code  
18940-3124FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PFIZEROccupation  
VP CORPORATE AVIATION

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 10 2023

Transaction ID : AFF79C4F158494747A0D

Amount of Each Receipt this Period

1500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

BROWN, ANTHONY, , ,

Mailing Address 5127 DENVER DR

City  
GALVESTONState  
TXZip Code  
77551-5942FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MAPAOccupation  
LAWYER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 02 2023

Transaction ID : AFC80D38782C445F0A92

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

GLENN, HARRY, , ,

Mailing Address 1540 GULF BLVD  
UNIT 404City  
CLEARWATERState  
FLZip Code  
33767-2960FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VAN SCOYOCOccupation  
VP

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 19 2023

Transaction ID : AEFBD8ED6F9C847F69A0

Amount of Each Receipt this Period

1000.00

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

VIOLA, JAMES, , ,

**A.** Mailing Address 1419 ORONOCO ST

City

ALEXANDRIA

State

VA

Zip Code

22314-2152

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HELICOPTEROccupation  
CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A8BE26C6A2B114284A54

Amount of Each Receipt this Period

1500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B.** 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 |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** 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 |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period

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

0.00

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

18467.52

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

PAGE 58 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

COUNTRY CLUB BANK

A. Mailing Address PO BOX 410889

City  
KANSAS CITYState  
MOZip Code  
64141FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

61420.88

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 31  |   | 2023    |

Transaction ID : AEEFFA82FD3DB4ACF9F5

Amount of Each Receipt this Period

17896.01

☐ Memo Item

BANK INTEREST

Full Name (Last, First, Middle Initial)

B. 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 |
|     |   |     |   |         |

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. 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 |
|     |   |     |   |         |

Amount of Each Receipt this Period

☐ Memo Item

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

17896.01

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

17896.01

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

PAGE 59 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AGC**

Mailing Address 2300 WILSON BOULEVARD SUITE 300

City  
ARLINGTONState  
VAZip Code  
22201Purpose of Disbursement  
LIST RENTALCandidate Name  
AGCCategory/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

350.00

Transaction ID : B0CAEB3E5FE64474EA14

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ARISTOTLE**Mailing Address 2285 PEACHTREE ROAD NE  
SUITE 210City  
ATLANTAState  
GAZip Code  
30309Purpose of Disbursement  
DATABASE SERVICES

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1950.00

Transaction ID : B324B766202A34514839

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AX CAPITAL**Mailing Address 555 METRO PL N  
STE 525City  
DUBLINState  
OHZip Code  
43017Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

110.10

Transaction ID : BE8C9D97599874B20914

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

2410.10

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

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

PAGE 60 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AX CAPITAL**Mailing Address 555 METRO PL N  
STE 525City  
DUBLINState  
OHZip Code  
43017Purpose of Disbursement  
COMPLIANCE AND ACCOUNTING

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

878.16

Transaction ID : B6F42620011814353A89

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AX CAPITAL**Mailing Address 555 METRO PL N  
STE 525City  
DUBLINState  
OHZip Code  
43017Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

55.44

Transaction ID : BA705201CCDC54DEEBCE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AX CAPITAL**Mailing Address 555 METRO PL N  
STE 525City  
DUBLINState  
OHZip Code  
43017Purpose of Disbursement  
ACCOUNTING AND COMPLIANCE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B756871481843487A918

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

2433.60

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

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

PAGE 61 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AX CAPITAL**Mailing Address 555 METRO PL N  
STE 525City  
DUBLINState  
OHZip Code  
43017Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

343.04

Transaction ID : B279C0AF4F27C4B5CB28

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AXIOM STRATEGIES**Mailing Address 800 W 47TH ST  
STE 200City  
KANSAS CITYState  
MOZip Code  
64112Purpose of Disbursement  
PRINT EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9746.00

Transaction ID : BC85EF4B72B4E4524B26

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AXIOM STRATEGIES**Mailing Address 800 W 47TH ST  
STE 200City  
KANSAS CITYState  
MOZip Code  
64112Purpose of Disbursement  
DIRECT MAIL

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

16952.00

Transaction ID : B3038F758C128444D9BA

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

27041.04

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

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

PAGE 62 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BRANDON FOR CONGRESS NY22**

Mailing Address PO BOX 3580

City  
SYRACUSEState  
NYZip Code  
13220Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
BRANDON FOR CONGRESS NY22Category/  
TypeOffice Sought: 

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 29 |   |   | 2023 |   |   |   |

FEC Identification Number

C C00806307

Amount of Each Disbursement this Period

1000.00

Transaction ID : BE3F2CCB84D634A9D972

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITAL ONE**

Mailing Address CAPITAL ONE DRIVE

City  
MCLEANState  
VAZip Code  
22102Purpose of Disbursement  
CREDIT CARD PMT

Candidate Name

Category/  
TypeOffice Sought: 

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 09 |   |   | 2023 |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

7207.31

Transaction ID : BAB3195C5459441419C2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINGNUTS**

Mailing Address 300 S SYCAMORE ST

City  
WITCHITAState  
KSZip Code  
67213Purpose of Disbursement  
TRAVEL EXPENSE

Candidate Name

Category/  
TypeOffice Sought: 

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 09 |   |   | 2023 |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

257.62

Transaction ID : B936796A1137840ED9D4

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

8207.31

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

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

PAGE 63 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. HYATT**

Mailing Address 400 NEW JERSEY AVE NW

City  
WASHINGTONState  
DCZip Code  
20001Purpose of Disbursement  
TRAVEL ROOM EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

302.63

Transaction ID : B475F2FBF3BA74A018C8

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVENUE NW

City  
WASHINGTONState  
DCZip Code  
20004-2601Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

859.65

Transaction ID : B02F838B8905E465D96E

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE HAMILTON**

Mailing Address 1001 14TH ST NW

City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

665.64

Transaction ID : B8F265EDF37EA4C7294C

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

0.00

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

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

PAGE 64 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST AIRLINES**

Mailing Address PO BOX 36647

City  
DALLASState  
TXZip Code  
75235Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

418.98

Transaction ID : B1CC7A8FA37964CA9B50

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVENUE NW

City  
WASHINGTONState  
DCZip Code  
20004-2601Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

407.05

Transaction ID : B372F3F3CA5174960A4A

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 233 S WACKER DR

City  
CHICAGOState  
ILZip Code  
60606-7147Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

488.90

Transaction ID : BCD1D191737504F53AF6

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

0.00

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

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

PAGE 65 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WINGNUTS**

Mailing Address 300 S SYCAMORE ST

City  
WITCHITAState  
KSZip Code  
67213Purpose of Disbursement  
TRAVEL EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

374.31

Transaction ID : BFC72AC9718F84BA79B2

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITAL ONE**

Mailing Address CAPITAL ONE DRIVE

City  
MCLEANState  
VAZip Code  
22102Purpose of Disbursement  
CREDIT CARD PMT

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

4364.77

Transaction ID : B067532FDE6CE4E11948

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HILL COUNTRY**

Mailing Address 410 7TH ST NW

City  
WASHINGTONState  
DCZip Code  
20004Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

3671.18

Transaction ID : B44AC841C27A1410891C

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

4364.77

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

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

PAGE 66 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. HOUSE GIFT SHOP**

Mailing Address 529 14TH STREET NW

City  
WASHINGTONState  
DCZip Code  
20045-1002Purpose of Disbursement  
SUPPLIES

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

342.00

Transaction ID : BF21C399BA7E9456FA26

☒ Memo Item**B. CAPITAL ONE**

Mailing Address CAPITAL ONE DRIVE

City  
MCLEANState  
VAZip Code  
22102Purpose of Disbursement  
CREDIT CARD PMT

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

15000.00

Transaction ID : B79ED9ABFEA0A4352A36

☐ Memo Item**C. UNITED AIRLINES**

Mailing Address 233 S WACKER DR

City  
CHICAGOState  
ILZip Code  
60606-7147Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

701.40

Transaction ID : BE6EB06DC37F14BB0AA2

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

15000.00

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

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

PAGE 67 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVENUE NW

City  
WASHINGTONState  
DCZip Code  
20004-2601Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

754.10

Transaction ID : BAD51BCBC14704D73994

☒ Memo Item**B. BIG T MOTEL**

Mailing Address 406 S 10TH STREET

City  
TARKIOState  
MOZip Code  
64491-1676Purpose of Disbursement  
TRAVEL ROOM EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

680.06

Transaction ID : BA05FF4F0344E4979ADD

☒ Memo Item**C. SOUTHWEST**

Mailing Address 2702 LOVE FIELD DR

City  
DALLASState  
TXZip Code  
75235Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

497.50

Transaction ID : B565CB655B498429B861

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

0.00

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

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

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST STREET SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1085.07

Transaction ID : B3CAD684F64894F62AEE

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. WASHINGTON EVENTS**

Mailing Address

City  
WASHINGTONState  
DC

Zip Code

Purpose of Disbursement  
CATERING FOOD & BEV

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1900.00

Transaction ID : B4C1644A8A5E14A87AB2

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. OCEAN PRIME**

Mailing Address 1341 G STREET NW

City  
WASHINGTONState  
DCZip Code  
20005-3105Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3583.48

Transaction ID : B27F5A1ED487F4A92B14

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

0.00

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

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

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST**

Mailing Address 2702 LOVE FIELD DR

City  
DALLASState  
TXZip Code  
75235Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2399.17

Transaction ID : B82F5CF48E2F642ACBC3

☒ Memo Item**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City  
FORT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

400.20

Transaction ID : B482EB663F6F64195B7E

☒ Memo Item**C. SOUTHWEST**

Mailing Address 2702 LOVE FIELD DR

City  
DALLASState  
TXZip Code  
75235Purpose of Disbursement  
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.60

Transaction ID : BEF98B7B55D0C4B159A7

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

0.00

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

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

PAGE 70 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST STREET SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 31  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

5755.52

Transaction ID : BDA8596E6A5834944B8A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CARDMEMBER SERVICE**

Mailing Address PO BOX 6327

City  
FARGOState  
NDZip Code  
58125-6327Purpose of Disbursement  
CREDIT CARD PMT

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 08  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

514.21

Transaction ID : BFB6BD87163A14C7B992

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHASE CANDY COMPANY**

Mailing Address 1307 S 59TH ST

City  
ST JOSEPHState  
MOZip Code  
64507Purpose of Disbursement  
EVENT SUPPLIES

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : B4C5094ED514840159BF

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

6569.73

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

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

PAGE 71 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CHASE CARD SERVICES**

Mailing Address P.O. BOX 15298

City  
WILMINGTONState  
DEZip Code  
19850Purpose of Disbursement  
CREDIT CARD PMT

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

10407.19

Transaction ID : B60D5EF22631B4FD19F8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JOE'S SEAFOOD**

Mailing Address 750 15TH ST SW

City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1870.12

Transaction ID : B6B2C590A902C43CAB4F

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. JOE'S SEAFOOD**

Mailing Address 750 15TH ST SW

City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

6383.22

Transaction ID : B9B9CA44A58A94FA8A45

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

10407.19

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

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

PAGE 72 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CHASE CARD SERVICES**

Mailing Address P.O. BOX 15298

City  
WILMINGTONState  
DEZip Code  
19850Purpose of Disbursement  
CREDIT CARD PMT

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

19967.98

Transaction ID : B3F514A9CCE04440ABF9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CORCORAN CATERERS**

Mailing Address 2401 MONTGOMERY STREET

City  
SILVER SPRINGState  
MDZip Code  
20910Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2169.58

Transaction ID : B5151B4A255464B7699B

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. HORSESHOE BAY**

Mailing Address 200 HI CIR N

City  
HORSESHOE BAYState  
TXZip Code  
78657Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3369.67

Transaction ID : B22304ECF947F4DC2B78

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

19967.98

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

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

PAGE 73 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. HORSESHOE BAY**

Mailing Address 200 HI CIR N

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 28  |   | 2023    |

City  
HORSESHOE BAYState  
TXZip Code  
78657

FEC Identification Number

**C**Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4557.67

Transaction ID : B97FC432E482847B9A6F

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. HILL COUNTRY**

Mailing Address 410 7TH ST NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 12  |   | 2023    |

City  
WASHINGTONState  
DCZip Code  
20004

FEC Identification Number

**C**Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2002.50

Transaction ID : B4520122815284F1CBC2

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C. OCEAN PRIME**

Mailing Address 1341 G STREET NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 23  |   | 2023    |

City  
WASHINGTONState  
DCZip Code  
20005-3105

FEC Identification Number

**C**Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

504.00

Transaction ID : BF2A57D686D974992A89

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

0.00

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

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

PAGE 74 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. OCEAN PRIME**

Mailing Address 1341 G STREET NW

City  
WASHINGTONState  
DCZip Code  
20005-3105Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1835.96

Transaction ID : B29A34A8365B849ABAA4

☒ Memo Item**B. CHEF PAUL PRESENTS**

Mailing Address 504 LINDEN STREET

City  
TARKIOState  
MOZip Code  
64491Purpose of Disbursement  
EVENT FOOD & BEV

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3797.10

Transaction ID : B797B3087D97F409DBC8

☐ Memo Item**C. CLINT DORRIS FOR CONGRESS**

Mailing Address PO BOX 1690

City  
ALEDOState  
TXZip Code  
76008Purpose of Disbursement  
CONTRIBUTION

Candidate Name

CLINT DORRIS FOR CONGRESS

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C C00858548

Amount of Each Disbursement this Period

1000.00

Transaction ID : B184064B920504E53B3B

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

4797.10

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

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

PAGE 75 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. COUNTRY CLUB BANK**

Mailing Address PO BOX 410889

City  
KANSAS CITYState  
MOZip Code  
64141Purpose of Disbursement  
DEPOSIT ITEM RETURNED

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B613B7F3739714580A74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. COUNTRY CLUB BANK**

Mailing Address PO BOX 410889

City  
KANSAS CITYState  
MOZip Code  
64141Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

459.79

Transaction ID : B3FFC976EA6EB432C9C4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DERRICK ANDERSON FOR VA, INC.**

Mailing Address PO BOX 330

City  
FREDERICKSBURGState  
VAZip Code  
22404Purpose of Disbursement  
CONTRIBUTION

Candidate Name

DERRICK ANDERSON FOR VA, INC.

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C C00791574

Amount of Each Disbursement this Period

1000.00

Transaction ID : B3F8E0837E6B34D26A42

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

1959.79

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

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

PAGE 76 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DESPOSITO FOR NEW YORK**

Mailing Address PO BOX 188

City  
ISLAND PARKState  
NYZip Code  
11558Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
DESPOSITO FOR NEW YORKCategory/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** C00809426

Amount of Each Disbursement this Period

1000.00

Transaction ID : B82A33F8CE64E47A7801

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ETHOS ADVISORS LLC**

Mailing Address 10603 N DALTON AVE

City  
KANSAS CITYState  
KSZip Code  
64154Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

100.00

Transaction ID : B071B75431BBE45B69C9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ETHOS ADVISORS LLC**

Mailing Address 10603 N DALTON AVE

City  
KANSAS CITYState  
KSZip Code  
64154Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

21.63

Transaction ID : BDE4BAABCE0E54F4C884

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

1121.63

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

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

PAGE 77 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ETHOS ADVISORS LLC**

Mailing Address 10603 N DALTON AVE

City  
KANSAS CITYState  
KSZip Code  
64154Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

30.77

Transaction ID : B071B51589421431FA1D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ETHOS ADVISORS LLC**

Mailing Address 10603 N DALTON AVE

City  
KANSAS CITYState  
KSZip Code  
64154Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : B67034A4599FA438FA1A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ETHOS ADVISORS LLC**

Mailing Address 10603 N DALTON AVE

City  
KANSAS CITYState  
KSZip Code  
64154Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : B45F5B182A92049509AB

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

6030.77

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

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

PAGE 78 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ETHOS ADVISORS LLC**

Mailing Address 10603 N DALTON AVE

City  
KANSAS CITYState  
KSZip Code  
64154Purpose of Disbursement  
FUNDRAISING EVENT COSTS

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1279.34

Transaction ID : BC2779261836D4482876

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ETHOS ADVISORS LLC**

Mailing Address 10603 N DALTON AVE

City  
KANSAS CITYState  
KSZip Code  
64154Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B467C612C9C084945BE9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FUNDRAISING, INC.**

Mailing Address 800 W 47TH ST

City  
KANSAS CITYState  
MOZip Code  
64112Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20963.40

Transaction ID : B4708D38552164ABE846

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

23742.74

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

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

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FUNDRAISING, INC.**

Mailing Address 800 W 47TH ST

City  
KANSAS CITYState  
MOZip Code  
64112Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

28224.26

Transaction ID : B1EB40F2178434FA4A3B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GEORGE LOGAN FOR CONGRESS**Mailing Address 26 CATOONAH STREET  
BOX 72City  
RIDGEFIELDState  
CTZip Code  
06877Purpose of Disbursement  
CONTRIBUTION

Candidate Name

GEORGE LOGAN FOR CONGRESS

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** C00784926

Amount of Each Disbursement this Period

1000.00

Transaction ID : BF5CD491B25834F14BDE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JOE TEIRAB FOR CONGRESS**

Mailing Address PO BOX 1894

City  
BURNSVILLEState  
MNZip Code  
55337Purpose of Disbursement  
CONTRIBUTION

Candidate Name

JOE TEIRAB FOR CONGRESS

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** C00853929

Amount of Each Disbursement this Period

1000.00

Transaction ID : BF8F21D720ACE463996B

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

30224.26

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

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

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. JOHN DUARTE FOR CONGRESS**

Mailing Address 9460 TEGNER ROAD

City  
HILMARState  
CAZip Code  
95324Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
JOHN DUARTE FOR CONGRESSCategory/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C C00808279

Amount of Each Disbursement this Period

1000.00

Transaction ID : BCE57C46A75B14655996

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JOHN JAMES FOR CONGRESS, INC.**

Mailing Address P.O. BOX 628

City  
ST. CLAIR SHORESState  
MIZip Code  
48080Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
JOHN JAMES FOR CONGRESS, INC.Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C C00803502

Amount of Each Disbursement this Period

1000.00

Transaction ID : BDCEFDA94972E416C821

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JUDGE JOE MCGRAW FOR CONGRESS**

Mailing Address PO BOX 1451

City  
ROCKFORDState  
ILZip Code  
61105Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
JUDGE JOE MCGRAW FOR CONGRESSCategory/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C C00851246

Amount of Each Disbursement this Period

1000.00

Transaction ID : BADB9BEB881704247B1B

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

3000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. KEAN FOR CONGRESS INC**

Mailing Address PO BOX 999

City  
EDISONState  
NJZip Code  
08818Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
KEAN FOR CONGRESS INCCategory/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** C00703058

Amount of Each Disbursement this Period

1000.00

Transaction ID : B0398CE78D2454631859

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KEVIN LINCOLN FOR CONGRESS**

Mailing Address 9460 TEGNER ROAD

City  
HILMARState  
CAZip Code  
95324Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
KEVIN LINCOLN FOR CONGRESSCategory/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** C00845826

Amount of Each Disbursement this Period

1000.00

Transaction ID : B0451254C35A640A2999

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LORI CHAVEZ-DEREMER FOR CONGRESS**Mailing Address 13203 SE 172ND AVE  
STE 166 #399City  
HAPPY VALLEYState  
ORZip Code  
97086Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
LORI CHAVEZ-DEREMER FOR CONGRESSCategory/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** C00784520

Amount of Each Disbursement this Period

1000.00

Transaction ID : BD50BBA54C061426FA5D

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

3000.00

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

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

PAGE 82 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MARC FOR US INC.**

Mailing Address PO BOX 5158

City  
POUGHKEEPSIEState  
NYZip Code  
12602Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
MARC FOR US INC.Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** C00789586

Amount of Each Disbursement this Period

1000.00

Transaction ID : BC502CAE5B297480A938

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MAYRA FLORES FOR CONGRESS**

Mailing Address PO BOX 516

City  
LOS INDIOSState  
TXZip Code  
78567Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
MAYRA FLORES FOR CONGRESSCategory/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** C00768994

Amount of Each Disbursement this Period

1000.00

Transaction ID : BB9E8A2920F8D40F09C1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MERCURI FOR CONGRESS**Mailing Address 3000 VILLAGE RUN RD  
STE 103-300City  
WEXFORDState  
PAZip Code  
15090Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
MERCURI FOR CONGRESSCategory/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** C00848150

Amount of Each Disbursement this Period

1000.00

Transaction ID : B1639949520654E798E4

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

3000.00

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

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

PAGE 83 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NANCY DAHLSTROM FOR ALASKA**

Mailing Address PO BOX 242442

City  
ANCHORAGEState  
AKZip Code  
99524Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
NANCY DAHLSTROM FOR ALASKACategory/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 2 | 9 | / | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** C00856716

Amount of Each Disbursement this Period

1000.00

Transaction ID : B5AC0EEFC00EF4408B50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NIEMEYER FOR CONGRESS**

Mailing Address PO BOX 727

City  
CEDAR LAKEState  
INZip Code  
46303Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
NIEMEYER FOR CONGRESSCategory/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 2 | 9 | / | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** C00851972

Amount of Each Disbursement this Period

1000.00

Transaction ID : B79E73564ED4E4A3F9AF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NORTHWEST CELL**

Mailing Address 1218 SOUTH MAIN STREET

City  
MARYVILLEState  
MOZip Code  
64468Purpose of Disbursement  
PHONES EXPENSE

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 0 | 4 | / | 2 | 0 | 2 | 3 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

129.11

Transaction ID : B6791335234FA455E836

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

2129.11

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

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

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. NORTHWEST CELL**

Mailing Address 1218 SOUTH MAIN STREET

City  
MARYVILLEState  
MOZip Code  
64468Purpose of Disbursement  
PHONES EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

129.11

Transaction ID : B3FB30D2BF78C435C854

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NORTHWEST CELL**

Mailing Address 1218 SOUTH MAIN STREET

City  
MARYVILLEState  
MOZip Code  
64468Purpose of Disbursement  
PHONES EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2023

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

129.11

Transaction ID : B4CA010F649184709830

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NORTHWEST CELL**

Mailing Address 1218 SOUTH MAIN STREET

City  
MARYVILLEState  
MOZip Code  
64468Purpose of Disbursement  
PHONES EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

129.11

Transaction ID : B1EE02035679542F9825

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

387.33

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

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

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. REDDY FOR KANSAS**

Mailing Address PO BOX 15804

City  
LENEXAState  
KSZip Code  
66285Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
REDDY FOR KANSASCategory/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C C00845347

Amount of Each Disbursement this Period

1000.00

Transaction ID : BF5241748E71347C0B0D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ROB FOR PA**

Mailing Address 11 DOCK ST BOX 971

City  
PITSTONState  
PAZip Code  
18640Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
ROB FOR PACategory/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C C00852137

Amount of Each Disbursement this Period

1000.00

Transaction ID : B695352E578DE4D2981E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCOTT BAUGH FOR CONGRESS**Mailing Address 4040 MACARTHUR BOULEVARD  
SUITE 200City  
NEWPORT BEACHState  
CAZip Code  
92660Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
SCOTT BAUGH FOR CONGRESSCategory/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C C00798322

Amount of Each Disbursement this Period

1000.00

Transaction ID : B261CB8D75B44471594E

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

3000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TARKIO RODEO ASSOCIATION**

Mailing Address 601 SOUTH 1ST ST

City  
TARKIOState  
MOZip Code  
64491Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

750.00

Transaction ID : BE92DC55702CA4DC2833

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THERIAULT FOR CONGRESS**

Mailing Address PO BOX 291

City  
FORT KENTState  
MEZip Code  
04743Purpose of Disbursement  
CONTRIBUTION

Candidate Name

THERIAULT FOR CONGRESS

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** C00852061

Amount of Each Disbursement this Period

1000.00

Transaction ID : BA6E96447759543E7969

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TIFFANY GREENS**

Mailing Address 5900 NW TIFFANY SPRINGS PKWY

City  
KANSAS CITYState  
MOZip Code  
64154Purpose of Disbursement  
EVENT VENUE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

9178.44

Transaction ID : BBA744BA39CCE4C6F849

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

10928.44

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

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

PAGE 87 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. TOM BARRETT FOR CONGRESS**

Mailing Address PO BOX 15221

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

City  
LANSINGState  
MIZip Code  
48901

FEC Identification Number

|   |           |
|---|-----------|
| C | C00793976 |
|---|-----------|

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
TOM BARRETT FOR CONGRESSCategory/  
Type

Amount of Each Disbursement this Period

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

Transaction ID : B0222ECF272E3461E9C8

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. VAN ORDEN FOR CONGRESS**

Mailing Address PO BOX 1836

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

City  
LA CROSSEState  
WIZip Code  
54602

FEC Identification Number

|   |           |
|---|-----------|
| C | C00742007 |
|---|-----------|

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
VAN ORDEN FOR CONGRESSCategory/  
Type

Amount of Each Disbursement this Period

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

Transaction ID : B737D3A2FBEF04F189FE

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

|   |           |
|---|-----------|
| C | C00694323 |
|---|-----------|

Purpose of Disbursement  
CREDIT CARD PROCESSINGCandidate Name  
WINREDCategory/  
Type

Amount of Each Disbursement this Period

|         |
|---------|
| 2081.89 |
|---------|

Transaction ID : BD734310A59064C3BA04

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

|         |
|---------|
| 4081.89 |
|---------|

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

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

PAGE 88 OF 95

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

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NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 31  |   | 2023    |

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD PROCESSINGCandidate Name  
WINREDCategory/  
Type

Amount of Each Disbursement this Period

8.50

Transaction ID : BC0134220D62D4A26835

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. YVETTE4CONGRESS**

Mailing Address PO BOX 404

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 29  |   | 2023    |

City  
LA LUZState  
NMZip Code  
88337

FEC Identification Number

**C** C00655571Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
YVETTE4CONGRESSCategory/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B5D46CA0F56924C019D9

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|     |   |     |   |         |

City

State

Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

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:

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

1008.50

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

194813.28

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

PAGE 89 OF 95

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

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NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A.** CHLOPECKI, JULIE, , ,

Mailing Address 1547 EVERS DR

City  
MC LEANState  
VAZip Code  
22101-5006Purpose of Disbursement  
REFUND: REFUND

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B6BD832E34AE84D4CAD1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

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

500.00

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

500.00

# SCHEDULE D (FEC Form 3)

## DEBTS AND OBLIGATIONS

### Excluding Loans

(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 90 OF 95

FOR LINE NUMBER:  
(check only one)

☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

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

**BOYLES MOTORS INC.**

Nature of Debt (Purpose):

VEHICLE LEASE

Mailing Address 204 N MARKET STREET

City

MARYVILLE

State

MO

Zip Code

64468-1624

Outstanding Balance Beginning This Period

500.00

Transaction ID : D7D318D73F0EB4E02A52

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

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

**BOYLES MOTORS INC.**

Nature of Debt (Purpose):

VEHICLE LEASE

Mailing Address 204 N MARKET STREET

City

MARYVILLE

State

MO

Zip Code

64468-1624

Outstanding Balance Beginning This Period

500.00

Transaction ID : D1199789836CE4A958DB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

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

**DOWDEN, WILLARD, , ,**

Nature of Debt (Purpose):

RENT FOR NODAWAY CO. REPUBLICAN  
COM

Mailing Address ROUTE 1, BOX 116

City

BURLINGTON JUNCTIO

State

MO

Zip Code

64428

Outstanding Balance Beginning This Period

200.00

Transaction ID : D389D85DE51A444C5A32

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

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

1200.00

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

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

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

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

PAGE 91 OF 95

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

NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

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

DOWDEN, WILLIAM, , ,

Nature of Debt (Purpose):

RENT FOR NODAWAY CO. REPUBLICAN  
COMM.Mailing Address ROUTE 1  
BOX 116City  
BURLINGTON JUNCTIOState  
MOZip Code  
64428

Outstanding Balance Beginning This Period

200.00

Transaction ID : DBB8014D1F6A044CA9F3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

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

KWRT-AM / KWRT-FM

Nature of Debt (Purpose):

RADIO ADVERTISING

Mailing Address 1600 RADIO HILL ROAD

City  
BOONVILLEState  
MOZip Code  
65233-1957

Outstanding Balance Beginning This Period

857.65

Transaction ID : DBBDEFD205C504F42B53

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

857.65

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

KWRT-AM / KWRT-FM

Nature of Debt (Purpose):

RADIO ADVERTISING

Mailing Address 1600 RADIO HILL ROAD

City  
BOONVILLEState  
MOZip Code  
65233-1957

Outstanding Balance Beginning This Period

857.65

Transaction ID : D3A100D7191AA4004A73

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

857.65

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

1915.30

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

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

PAGE 92 OF 95

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

NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

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

MISSOURI RIGHT TO LIFE PAC

Nature of Debt (Purpose):

MEMBERSHIP LABELS

Mailing Address PO BOX 651

City  
JEFFERSON CITYState  
MOZip Code  
65102-0651

Outstanding Balance Beginning This Period

1087.00

Transaction ID : D07570D948F5846A892E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1087.00

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

MISSOURI RIGHT TO LIFE PAC

Nature of Debt (Purpose):

MEMBERSHIP LABELS

Mailing Address PO BOX 651

City  
JEFFERSON CITYState  
MOZip Code  
65102

Outstanding Balance Beginning This Period

1087.00

Transaction ID : D3BE79CA52D224DB6808

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1087.00

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

STOR SAFE

Nature of Debt (Purpose):

STORAGE RENTAL

Mailing Address 1501 BURLINGTON STREET

City  
KANSAS CITYState  
MOZip Code  
64116-3814

Outstanding Balance Beginning This Period

1000.00

Transaction ID : D6539BEA24A374542AF5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

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

3174.00

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

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

PAGE 93 OF 95

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

NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

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

**STOR SAFE**

Nature of Debt (Purpose):

STORAGE RENTAL

Mailing Address 1501 BURLINGTON STREET

City  
KANSAS CITYState  
MOZip Code  
64116-3814

Outstanding Balance Beginning This Period

1000.00

Transaction ID : DFE00A4AC69C5479D899

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

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

**THE GULA GRAHAM GROUP**

Nature of Debt (Purpose):

FUNDRAISING EXPENSES - DISPUTED  
DEBTMailing Address 499 S. CAPITOL STREET SW  
SUITE 420City  
WASHINGTONState  
DCZip Code  
20003-4027

Outstanding Balance Beginning This Period

1495.59

Transaction ID : DFC5B9F28E66D464CBCA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1495.59

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

**THE GULA GRAHAM GROUP**

Nature of Debt (Purpose):

FUNDRAISING EXPENSES - DISPUTED  
DEBTMailing Address 499 S. CAPITOL STREET SW  
SUITE 420City  
WASHINGTONState  
DCZip Code  
20003-4027

Outstanding Balance Beginning This Period

10804.39

Transaction ID : D6C54E35B238F45CE9FD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10804.39

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

13299.98

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

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

PAGE 94 OF 95

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

NAME OF COMMITTEE (In Full)

**GRAVES FOR CONGRESS**

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

**THE GULA GRAHAM GROUP**

Nature of Debt (Purpose):

FUNDRAISING EXPENSES - DISPUTED  
DEBTMailing Address 499 S. CAPITOL STREET SW  
SUITE 420City  
WASHINGTONState  
DCZip Code  
20003-4027

Outstanding Balance Beginning This Period

2909.04

Transaction ID : D8A027969DFC044E8B08

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2909.04

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

**THE GULA GRAHAM GROUP**

Nature of Debt (Purpose):

FUNDRAISING CONSULTING - DISPUTED  
DEBTMailing Address 499 S. CAPITOL STREET SW  
SUITE 420City  
WASHINGTONState  
DCZip Code  
20003-4027

Outstanding Balance Beginning This Period

35853.00

Transaction ID : D945E622404944701905

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

35853.00

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

**THE LUKENS COMPANY**

Nature of Debt (Purpose):

PRINTING,MAIL,POSTAGE,DATA

Mailing Address 2800 S SHIRLINGTON ROAD  
FLOOR 9City  
ARLINGTONState  
VAZip Code  
22206-3601

Outstanding Balance Beginning This Period

1877.76

Transaction ID : D61F91A8896AE455C8FE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1877.76

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

40639.80

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

# SCHEDULE D (FEC Form 3)

## DEBTS AND OBLIGATIONS

### Excluding Loans

(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 95 OF 95

FOR LINE NUMBER:  
(check only one)

☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

GRAVES FOR CONGRESS

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

THE LUKENS COMPANY

Nature of Debt (Purpose):

PRINTING, MAIL, POSTAGE, AND DATA

Mailing Address 2800 S SHIRLINGTON ROAD  
FLOOR 9

City  
ARLINGTON

State  
VA

Zip Code  
22206-3601

Outstanding Balance Beginning This Period

1877.76

Transaction ID : DC0199C8F5CC1443CA33

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1877.76

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

1877.76

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

62106.84

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

0.00

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

62106.84