

# 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)

PO BOX 335

Check if different than previously reported. (ACC)

CALHOUN

GA

30703

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00462556

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

GA

14

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 2019

through

M M /

D D /

Y Y Y Y 2019

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

KILGORE, PAUL, , ,

Type or Print Name of Treasurer

Signature of Treasurer

KILGORE, PAUL, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2020

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**GRAVES FOR CONGRESS**

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

	<b>COLUMN A This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	<input type="text" value="86075.00"/>	<input type="text" value="696049.00"/>
(b) Total Contribution Refunds (from Line 20(d)) .....	<input type="text" value="2250.00"/>	<input type="text" value="2025.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	<input type="text" value="83825.00"/>	<input type="text" value="694024.00"/>
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	<input type="text" value="125114.13"/>	<input type="text" value="592426.78"/>
(b) Total Offsets to Operating Expenditures (from Line 14).....	<input type="text" value="0.00"/>	<input type="text" value="8924.76"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	<input type="text" value="125114.13"/>	<input type="text" value="583502.02"/>
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<input type="text" value="2194475.88"/>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<input type="text" value="0.00"/>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<input type="text" value="0.00"/>	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**GRAVES FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5000.00	142350.00
(ii) Unitemized.....	75.00	449.00
(iii) TOTAL of contributions from individuals ▶	5075.00	142799.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	81000.00	553250.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	86075.00	696049.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	69000.51
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	8924.76
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	7642.29	39448.88
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	93717.29	813423.15

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 82

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	125114.13	592426.78
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	250.00	250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	1775.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2250.00	2025.00
21. OTHER DISBURSEMENTS .....	7500.00	5975.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	134864.13	600426.78

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2235622.72
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	93717.29
25. SUBTOTAL (add Line 23 and Line 24).....	2329340.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	134864.13
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2194475.88

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

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

FOR LINE NUMBER: PAGE 5 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name (Last, First, Middle Initial)  
**BRAVO, MATTHEW, , ,**

Mailing Address 2205 S MONROE ST

City ARLINGTON State VA Zip Code 22206-2423

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

Name of Employer S-3 GROUP Occupation CONSULTANT

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 01 / 2019

Transaction ID : **A3D2B2C3F16484407939**

Amount of Each Receipt this Period  
1250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**COONEY, MANUS, , ,**

Mailing Address 8801 BEL AIR PL

City POTOMAC State MD Zip Code 20854-1604

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

Name of Employer AMERICAN CONTINENTAL GROUP Occupation MANAGING PARTNER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2019

Transaction ID : **A98D419ED694B417F85C**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 1526 17TH ST NW

City WASHINGTON State DC Zip Code 20036-6216

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

Name of Employer MILLER STRATEGIES Occupation LOBBYIST

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 22 / 2019

Transaction ID : **AA777703D56E0485892C**

Amount of Each Receipt this Period  
250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00

**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 6 OF 82  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**PERRY, GERALD, S., ,**  
 Mailing Address 4087 RIDGEVIEW CIR  
 City MCLEAN State VA Zip Code 22101-5809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PERRY BAYLISS Occupation PRINCIPAL  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 23 2019  
**Transaction ID : A1551D1738ECE464D851**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SEABOLT, DOUGLAS, M., ,**  
 Mailing Address 13000 N RIDGE RD  
 City PLYMOUTH State MI Zip Code 48170-5216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 23 2019  
**Transaction ID : A878807E3A8B0445BB14**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 82	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**ACTION COMMITTEE FOR RURAL ELECTRIFICATION (ACRE) PAC**

Mailing Address 4301 WILSON BLVD

City ARLINGTON	State VA	Zip Code 22203-1867
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FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer	Occupation
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Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2019

**Transaction ID : ABAE1BD32835842ACA63**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 1932 WYNNTON RD

City COLUMBUS	State GA	Zip Code 31999-0001
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer	Occupation
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Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 07 / 2019

**Transaction ID : A6CE569907EB145BF8BC**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN FINANCIAL SERVICES ASSOCIATION PAC**

Mailing Address 919 EIGHTEENTH ST. NW, STE. 300

City WASHINGTON	State DC	Zip Code 20006-5531
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00038604

Name of Employer	Occupation
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Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2019

**Transaction ID : AEBC24CF73B946589E8**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 82	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**ASSOCIATED GENERAL CONTRACTORS OF AMERICA PAC(AGC PAC)**

Mailing Address 2300 WILSON BLVD STE 400

City ARLINGTON	State VA	Zip Code 22201-5426
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FEC ID number of contributing federal political committee. **C** C00082917

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 22 / 2019

**Transaction ID : A9440647D1747461D988**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND**

Mailing Address 1680 CAPITAL ONE DRIVE  
1376-D

City MC LEAN	State VA	Zip Code 22102-3407
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FEC ID number of contributing federal political committee. **C** C00326595

Name of Employer	Occupation
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Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2019

**Transaction ID : A448AF3FAFD73405BBE6**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

Mailing Address 1400 16TH ST NW STE 600

City WASHINGTON	State DC	Zip Code 20036-2225
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FEC ID number of contributing federal political committee. **C** C00262295

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 10 / 2019

**Transaction ID : A0327B4625A2F4A0BBEF**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	9500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 82	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

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

Mailing Address 1212 NEW YORK AVENUE NW STE 200

City WASHINGTON	State DC	Zip Code 20005-6609
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FEC ID number of contributing federal political committee. **C** C00104802

Name of Employer	Occupation
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Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2019

Transaction ID : **AB7FCC0496FA94A3DBE7**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DISCOVER FINANCIAL SERVICES PAC**

Mailing Address 500 8TH ST NW STE 210

City WASHINGTON	State DC	Zip Code 20004-2131
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FEC ID number of contributing federal political committee. **C** C00438051

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 20 / 2019

Transaction ID : **A7CF49B12D87F4CA9BCC**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ELECTRONIC TRANSACTIONS ASSOCIATION PAC (ETA PAC)**

Mailing Address 1101 16TH ST NW STE 402

City WASHINGTON	State DC	Zip Code 20036-4831
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FEC ID number of contributing federal political committee. **C** C00548198

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2019

Transaction ID : **A9932BB7673454CD8889**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 82	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**EQUIFAX INC. PAC**

Mailing Address PO BOX 4081

City ATLANTA	State GA	Zip Code 30302-4081
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FEC ID number of contributing federal political committee. **C** C00143867

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2019

**Transaction ID : A7A905D308D464E88A8F**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**EXPERIAN NORTH AMERICA PAC (EXPERIAN PAC)**

Mailing Address 475 ANTON BLVD

City COSTA MESA	State CA	Zip Code 92626-7037
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FEC ID number of contributing federal political committee. **C** C00379768

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 20 / 2019

**Transaction ID : AB14B8C46B6944C8AA6E**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**EXPERIAN NORTH AMERICA PAC (EXPERIAN PAC)**

Mailing Address 475 ANTON BLVD

City COSTA MESA	State CA	Zip Code 92626-7037
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00379768

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 20 / 2019

**Transaction ID : A8695FDF2522F494BA82**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 82	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**FMR LLC PAC**

Mailing Address 82 DEVONSHIRE ST #N5A

City BOSTON	State MA	Zip Code 02109-3605
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FEC ID number of contributing federal political committee. **C** C00380550

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 10 / 2019

**Transaction ID : A81F39BEF0A89426A9F3**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GENERAL DYNAMICS CORP PAC**

Mailing Address 2941 FAIRVIEW PARK DR, STE 100

City FALLS CHURCH	State VA	Zip Code 22042-4541
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FEC ID number of contributing federal political committee. **C** C00078451

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2019

**Transaction ID : A44B945A7BBA442D0A21**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**HUNTINGTON INGALLS INDUSTRIES, INC. EMPLOYEES PAC(HIIPAC)**

Mailing Address 300 M ST SE, STE 350

City WASHINGTON	State DC	Zip Code 20003-3436
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00325092

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : A612280F8F8AC4953A18**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 82	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**INTERNATIONAL PAPER PAC**

Mailing Address 1101 PENNSYLVANIA AVE NW  
STE 200

City WASHINGTON State DC Zip Code 20004-2514

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

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 19 / 2019

Transaction ID : **AB9C20843333E4815A94**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**INVESCO HOLDING COMPANY(US), INC. PAC**

Mailing Address 1360 PEACHTREE ST NE

City ATLANTA State GA Zip Code 30309-3283

FEC ID number of contributing federal political committee. **C** C00253369

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 03 / 2019

Transaction ID : **A9543D09288F24808984**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
JACKSON HOLDINGS LLC AND JACKSON NATIONAL LIFE INSURANCE COMPANY SEPARATE SEGREGATED FUNDS

Mailing Address 1 CORPORATE WAY

City LANSING State MI Zip Code 48951-1001

FEC ID number of contributing federal political committee. **C** C00254953

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 10 / 2019

Transaction ID : **ADAF093B9E7704B02AE5**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 82	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name (Last, First, Middle Initial)  
**JOBS, ENERGY AND OUR FOUNDING FATHERS PAC-JEFF PAC**

Mailing Address 228 S WASHINGTON ST  
STE 115

City ALEXANDRIA	State VA	Zip Code 22314-5404
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00516724

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 23 / 2019

Transaction ID : AC64F280FD192410BAC8

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 2121 CRYSTAL DR, STE 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: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 19 / 2019

Transaction ID : A2A7C2A8A9DDA4736A54

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MARSH & MCLENNAN COMPANIES, INC. PAC (MMCPAC)**

Mailing Address 1166 AVENUE OF THE AMERICAS

City NEW YORK	State NY	Zip Code 10036
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00457234

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 07 / 2019

Transaction ID : A839D6D58CBD14582A31

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 82	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**MASSACHUSETTS MUTUAL LIFE INSURANCE PAC**

Mailing Address 1295 STATE STREET

City SPRINGFIELD	State MA	Zip Code 01111-0001
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00118943

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2019

**Transaction ID : A37272B436C4149AC9BF**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

Mailing Address 16011 NE 36TH WAY

City REDMOND	State WA	Zip Code 98052-6301
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00227546

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 03 / 2019

**Transaction ID : AC38349773F21473F837**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL VENTURE CAPITAL ASSOCIATION VENTUREPAC**

Mailing Address 25 MASSACHUSETTS AVE NW  
STE 730

City WASHINGTON	State DC	Zip Code 20001-7401
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00150367

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2019

**Transaction ID : A00FADAC991A24EDBA30**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 82  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**NCR CORPORATION PAC (NCRPAC)**

Mailing Address 20 F ST NW  
FL 7

City WASHINGTON State DC Zip Code 20001-6700

FEC ID number of contributing federal political committee. **C** C00324103

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 23 2019

Transaction ID : **AE07BA96D5CCA48238B7**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**PACIFIC LIFE INSURANCE COMPNAY PAC**

Mailing Address 700 NEWPORT CENTER DRIVE

City NEWPORT BEACH State CA Zip Code 92660-6307

FEC ID number of contributing federal political committee. **C** C00068528

Name of Employer Occupation

Receipt For: 2020  
 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 2019

Transaction ID : **A76FF2E159A5C4A75B78**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

Mailing Address 249 5TH AVE  
FL 21

City PITTSBURGH State PA Zip Code 15222-2707

FEC ID number of contributing federal political committee. **C** C00186064

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 10 2019

Transaction ID : **AF3999EDCBD5041B7A9E**

Amount of Each Receipt this Period  
5000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 9000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 82	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**POLSINELLI PAC**

Mailing Address 700 W 47TH ST  
STE 1000

City KANSAS CITY State MO Zip Code 64112-1805

FEC ID number of contributing federal political committee. **C** C00445981

Name of Employer Occupation

Receipt For: 2020  
 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 / 2019

**Transaction ID : A0151A2911C1C43429C3**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 600 13TH ST NW, STE 1000

City WASHINGTON State DC Zip Code 20005-3005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 19 / 2019

**Transaction ID : ABA133B13806249D9BAF**

Amount of Each Receipt this Period  
3000.00

Memo Item

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

Mailing Address 600 13TH ST NW, STE 1000

City WASHINGTON State DC Zip Code 20005-3005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 19 / 2019

**Transaction ID : A7A63960379B64996B32**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 82	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**REGIONS FINANCIAL CORPORATION PAC**

Mailing Address 1015 15TH ST. NW  
STE. 920

City WASHINGTON	State DC	Zip Code 20005-2623
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00432252

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
12 / 31 / 2019

**Transaction ID : A2F26C65A04524F698FE**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SAZERAC COMPANY, INC. PAC (SAZERACPAC)**

Mailing Address 507 C ST NE

City WASHINGTON	State DC	Zip Code 20002-5809
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00639138

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
10 / 23 / 2019

**Transaction ID : A932D6B3AA112406BB28**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL PAC**

Mailing Address 1 STATE FARM PLAZA  
C/O MARK SCHWAMBERGER, TREASURER,

City BLOOMINGTON	State IL	Zip Code 61710-0001
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00544817

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
10 / 23 / 2019

**Transaction ID : A00772FBF18D34B2B979**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 82	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**TEACHERS INSURANCE ANNUITY ASSOCIATION OF AMERICA PAC (TIAA PAC)**

Mailing Address 601 THIRTEENTH STREET, NW  
SUITE 700 NORTH

City WASHINGTON	State DC	Zip Code 20005-3807
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00431361

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2019

**Transaction ID : A6144A4B659144C77B0E**

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

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**THE COCA-COLA CO GOOD GOVERNMENT PAC**

Mailing Address PO BOX 1734

City ATLANTA	State GA	Zip Code 30301-1734
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00012468

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2019

**Transaction ID : A969DEB6517484173B9D**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**THE COCA-COLA CO GOOD GOVERNMENT PAC**

Mailing Address PO BOX 1734

City ATLANTA	State GA	Zip Code 30301-1734
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00012468

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2019

**Transaction ID : A269F7926D3904690856**

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 7500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 19 OF 82  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**THE COUNCIL OF INSURANCE AGENTS & BROKERS PAC**

Mailing Address 701 PENNSYLVANIA AVE NW, STE 750

City WASHINGTON State DC Zip Code 20004-2661

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
9500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 23 / 2019

Transaction ID : **A3932BF838F1B4042848**

Amount of Each Receipt this Period  
 5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)**

Mailing Address 601 PENNSYLVANIA AVENUE NW  
SUITE 800 NORTH BLDG.

City WASHINGTON State DC Zip Code 20004-2710

FEC ID number of contributing federal political committee. **C** C00361758

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2019

Transaction ID : **ACEE05F7F32EB48EF8AD**

Amount of Each Receipt this Period  
 500.00

Memo Item  
IN-KIND:MEETING EXPENSE

**C.** Full Name (Last, First, Middle Initial)  
**T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)**

Mailing Address 601 PENNSYLVANIA AVENUE NW  
SUITE 800 NORTH BLDG.

City WASHINGTON State DC Zip Code 20004-2710

FEC ID number of contributing federal political committee. **C** C00361758

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
8000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2019

Transaction ID : **ADC43323525DD4B2BA18**

Amount of Each Receipt this Period  
 500.00

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 Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 82	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)**

Mailing Address 601 PENNSYLVANIA AVENUE NW  
SUITE 800 NORTH BLDG.

City WASHINGTON	State DC	Zip Code 20004-2710
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00361758

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

Receipt For: 2020  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
8000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
10 / 23 / 2019

Transaction ID : AA7DE2A22DDEC4D239BA

Amount of Each Receipt this Period  
2000.00

Memo Item

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

Mailing Address 555 W ADAMS ST

City CHICAGO	State IL	Zip Code 60661-3719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00313700

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

Receipt For: 2020  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
10 / 23 / 2019

Transaction ID : A64A06754A42A43BDA96

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
-------------------------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	81000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 OF 82  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**FIRST BANK OF DALTON**

Mailing Address PO BOX 459

City: DALTON State: GA Zip Code: 30722-0459

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 3910.01

Date of Receipt: 10 / 31 / 2019

Transaction ID : A76D9BA32B031462BB3B

Amount of Each Receipt this Period: 352.95

Memo Item  
INTEREST INCOME

**B.** Full Name (Last, First, Middle Initial)  
**FIRST BANK OF DALTON**

Mailing Address PO BOX 459

City: DALTON State: GA Zip Code: 30722-0459

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 4251.65

Date of Receipt: 11 / 30 / 2019

Transaction ID : AEA2B66E607894077B44

Amount of Each Receipt this Period: 341.64

Memo Item  
INTEREST INCOME

**C.** Full Name (Last, First, Middle Initial)  
**FIRST BANK OF DALTON**

Mailing Address PO BOX 459

City: DALTON State: GA Zip Code: 30722-0459

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 4604.75

Date of Receipt: 12 / 31 / 2019

Transaction ID : A6CB5C6E964224590BB3

Amount of Each Receipt this Period: 353.10

Memo Item  
INTEREST INCOME

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1047.69

**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 22 OF 82  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**GEORGIA PAC**

Mailing Address 2470 DANIELL'S BRIDGE RD, STE 121

City: ATHENS State: GA Zip Code: 30606-6191

FEC ID number of contributing federal political committee: **C** C00490235

Name of Employer: Occupation:

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3767.59

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2019

Transaction ID : **AE325E8C247DB4FDDDB49**

Amount of Each Receipt this Period  
1853.59

Memo Item  
REIMBURSE 10/18/19 MC PMT OF \$4226.93

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

Mailing Address 2470 DANIELL'S BRIDGE RD, STE 121

City: ATHENS State: GA Zip Code: 30606-6191

FEC ID number of contributing federal political committee: **C** C00490235

Name of Employer: Occupation:

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5725.34

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2019

Transaction ID : **ACA4A7C928E06436CA3F**

Amount of Each Receipt this Period  
1511.49

Memo Item  
REIMBURSE 11/25/19 MC PMT OF \$1280.82

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

Mailing Address 2470 DANIELL'S BRIDGE RD, STE 121

City: ATHENS State: GA Zip Code: 30606-6191

FEC ID number of contributing federal political committee: **C** C00490235

Name of Employer: Occupation:

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5725.34

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2019

Transaction ID : **AA27B9F1CC5614DEBA7B**

Amount of Each Receipt this Period  
446.26

Memo Item  
REIMBURSE 11/25/19 MC PMT OF \$834.60

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3811.34

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

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

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

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

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

**A.** Full Name (Last, First, Middle Initial)  
**STATE FARM INSURANCE COMPANY**

Mailing Address 1 STATE FARM PLZ

City BLOOMINGTON State IL Zip Code 61710-0001

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

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
456.37

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 08 / 2019

Transaction ID : **ACBC33366DA76485DAB9**

Amount of Each Receipt this Period  
456.37

Memo Item  
REFUND ON CANCELED AUTO POLICY

**B.** Full Name (Last, First, Middle Initial)  
**TEAM GRAVES**

Mailing Address 824 S MILLEDGE AVE, STE 101

City ATHENS State GA Zip Code 30605-1332

FEC ID number of contributing federal political committee. **C** C00501866

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
35382.87

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 16 / 2019

Transaction ID : **ACC723CC7CFF941558E5**

Amount of Each Receipt this Period  
122.58

Memo Item  
REIMBURSE 10/10/19 AMEX PMT OF \$6593.91

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

Mailing Address 824 S MILLEDGE AVE, STE 101

City ATHENS State GA Zip Code 30605-1332

FEC ID number of contributing federal political committee. **C** C00501866

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
35401.02

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 15 / 2019

Transaction ID : **A686A6F9589014202A05**

Amount of Each Receipt this Period  
18.15

Memo Item  
REIMBURSE 11/14/19 FOR AMEX PMT OF 18.15

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 597.10

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 24 OF 82	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.** Full Name (Last, First, Middle Initial)  
**TEAM GRAVES**

Mailing Address 824 S MILLEDGE AVE, STE 101

City ATHENS	State GA	Zip Code 30605-1332
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00501866

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

Receipt For: 2020  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
37587.18

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 12 / 2019

**Transaction ID : A44DB3BE4BA6248F5951**

Amount of Each Receipt this Period  
2186.16

Memo Item  
REIMBURSE 12/11/19 AMEX PMT OF \$2186.16

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2186.16
<b>TOTAL</b> This Period (last page this line number only)..... ▶	7642.29



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2019	
Mailing Address PO BOX 650448			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75265-0448	Amount of Each Disbursement this Period 18.85	
Purpose of Disbursement CREDIT CARD FEE		Category/ Type 001	Transaction ID : B5D97A0C2D9F04B669C6	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2019	
Mailing Address PO BOX 650448			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75265-0448	Amount of Each Disbursement this Period 6593.91	
Purpose of Disbursement SEE MEMO		Category/ Type 001	Transaction ID : B36466A967FBD4FAE882	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. AMAZON</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2019	
Mailing Address 1516 2ND AVE			FEC Identification Number C	
City SEATTLE	State WA	Zip Code 98101-1543	Amount of Each Disbursement this Period 273.89	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : BBC8FF5FCE30A4D4C9CF	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6612.76
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. GOGO AIR</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2019	
Mailing Address 111 N CANAL ST FL 15			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60606-7205	Amount of Each Disbursement this Period 49.95	
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : BD8061E8AC11A406886E	
Candidate Name			<input checked="" type="checkbox"/> 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:				

Full Name (Last, First, Middle Initial) <b>B. ENVOY HOTEL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2019	
Mailing Address 70 SLEEPER ST			FEC Identification Number C	
City BOSTON	State MA	Zip Code 02210-1226	Amount of Each Disbursement this Period 817.30	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BF9A547FE301A4FC69D9	
Candidate Name			<input checked="" type="checkbox"/> 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:				

Full Name (Last, First, Middle Initial) <b>C. CWC BUSINESS SOLUTIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2019	
Mailing Address 4343 NORTHEAST EXPY			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30340-3805	Amount of Each Disbursement this Period 7105.86	
Purpose of Disbursement DONOR GIFTS (SWEATSHIRTS)		Category/ Type 001	Transaction ID : BBC3BBCF696E34A288EC	
Candidate Name			<input checked="" type="checkbox"/> 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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2019
Mailing Address 182 HOWARD ST STE 8		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94105-1611
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 79.95
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. DELTA AIR LINES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2019
Mailing Address 1030 DELTA BLVD		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30354-1989
Purpose of Disbursement AIRFARE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period - 2271.90
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AT YOUR SERVICE TAXI AND TOURS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2019
Mailing Address 55 WEST ST		FEC Identification Number C
City BAR HARBOR	State ME	Zip Code 04609-1825
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 140.00
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:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2019
Mailing Address PO BOX 650448		FEC Identification Number C
City DALLAS	State TX	Zip Code 75265-0448
Purpose of Disbursement MEETING EXPENSE - NO ITEMIZATION NECESSARY		001
Candidate Name		Amount of Each Disbursement this Period 18.15
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:	Transaction ID : BDBFB07ED0F3C4428BE7 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2019
Mailing Address PO BOX 650448		FEC Identification Number C
City DALLAS	State TX	Zip Code 75265-0448
Purpose of Disbursement SEE MEMO		001
Candidate Name		Amount of Each Disbursement this Period 2290.22
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:	Transaction ID : B51907AD40D1E48DF885 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. GOGO AIR</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2019
Mailing Address 111 N CANAL ST FL 15		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60606-7205
Purpose of Disbursement INTERNET		001
Candidate Name		Amount of Each Disbursement this Period 49.95
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:	Transaction ID : B50F507436CC7416B91E <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2308.37
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. DELTA AIR LINES</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2019
Mailing Address 1030 DELTA BLVD			FEC Identification Number C
City ATLANTA	State GA	Zip Code 30354-1989	Amount of Each Disbursement this Period 212.20
Purpose of Disbursement AIRFARE		Category/Type 002	Transaction ID : B9A9BB98A5992461E930
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. BULLFEATHERS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2019
Mailing Address 410 1ST ST SE			FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1819	Amount of Each Disbursement this Period 110.70
Purpose of Disbursement MEETING EXPENSE		Category/Type 001	Transaction ID : B68AEF12071D34555957
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. HOUSE GIFT SHOP</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2019
Mailing Address 529 14TH ST NW STE 807			FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20045-1801	Amount of Each Disbursement this Period 85.20
Purpose of Disbursement OFFICE SUPPLIES		Category/Type 001	Transaction ID : B12E279D76DA346E9920
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2019	
Mailing Address 6000 N TERMINAL PKWY			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30320-7400	Amount of Each Disbursement this Period 24.99	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 002	Transaction ID : B4C361C04B2C740C58A6	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2019	
Mailing Address 300 1ST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 251.73	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : BA2C424F6B9D84219B48	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. BEST BUY</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2019	
Mailing Address 1210 CAROLINE ST NE			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30307-2706	Amount of Each Disbursement this Period 42.39	
Purpose of Disbursement COMPUTER SUPPORT		Category/ Type 001	Transaction ID : BFAF310AA9CA64BE8890	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2019		
Mailing Address 6000 N TERMINAL PKWY			FEC Identification Number C		
City ATLANTA	State GA	Zip Code 30320-7400	Amount of Each Disbursement this Period 1094.00		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 002	Transaction ID : BDAC5492990D549C4A41		
Candidate Name		<input checked="" type="checkbox"/> 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:					

Full Name (Last, First, Middle Initial) <b>B. GOGO AIR</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2019		
Mailing Address 111 N CANAL ST FL 15			FEC Identification Number C		
City CHICAGO	State IL	Zip Code 60606-7205	Amount of Each Disbursement this Period 31.95		
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : BD115B478182A4D02936		
Candidate Name		<input checked="" type="checkbox"/> 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:					

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2019		
Mailing Address PO BOX 650448			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75265-0448	Amount of Each Disbursement this Period 2186.16		
Purpose of Disbursement SEE MEMO		Category/ Type 001	Transaction ID : B49E41FFAF2064D6B802		
Candidate Name		<input type="checkbox"/> 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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2186.16
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. YETI CUSTOM SHOP</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2019	
Mailing Address 2301 E SAINT ELMO RD STE 300			FEC Identification Number C	
City AUSTIN	State TX	Zip Code 78744-1089	Amount of Each Disbursement this Period 1605.56	
Purpose of Disbursement DONOR GIFTS-CUPS		Category/ Type 003	Transaction ID : BC2A9128B87C34F85B5F	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. DELTA AIR LINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2019	
Mailing Address 1030 DELTA BLVD			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30354-1989	Amount of Each Disbursement this Period 580.60	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B52A02885F7F54AFF9BD	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2019	
Mailing Address PO BOX 650448			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75265-0448	Amount of Each Disbursement this Period 4268.09	
Purpose of Disbursement SEE MEMO		Category/ Type 001	Transaction ID : BD1FEC9C12C124C52B61	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4268.09
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. LYFT</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2019
Mailing Address 814 BELLEMEADE AVE NW		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30318-3106
Purpose of Disbursement TRAVEL EXPENSE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 191.01
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:	Transaction ID : BD9F8D506534A48B48D3 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. GALLERIA FLORIST</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2019
Mailing Address 7187 LEE HWY		FEC Identification Number C
City FALLS CHURCH	State VA	Zip Code 22046-3745
Purpose of Disbursement FUNDRAISING EXPENSE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 273.50
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:	Transaction ID : B5A9C0B67898B44D3B8D <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. GEEK SQUAD</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2019
Mailing Address 345 INTERNATIONAL BLVD		FEC Identification Number C
City BROOKS	State KY	Zip Code 40109-5287
Purpose of Disbursement COMPUTER EXPENSE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 666.59
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:	Transaction ID : B949B0BC000084CEA9F9 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2019	
Mailing Address PO BOX 650448			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75265-0448	Amount of Each Disbursement this Period 340.22	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : BED9FD94CB9A341A7B31	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. AMTRAK</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2019	
Mailing Address 60 MASSACHUSETTS AVE NE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002-4285	Amount of Each Disbursement this Period 315.00	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 002	Transaction ID : B67C7384E39A24499B58	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. WEATHERTECH DIRECT</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2019	
Mailing Address 841 REMINGTON BLVD			FEC Identification Number C	
City BOLINGBROOK	State IL	Zip Code 60440-4932	Amount of Each Disbursement this Period 243.86	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 002	Transaction ID : BEE197F5313694C76B18	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

**A. BULLFROG BAGELS**

Full Name (Last, First, Middle Initial)  
Mailing Address 317 7TH ST SE

City WASHINGTON State DC Zip Code 20003-4307

Purpose of Disbursement MEETING EXPENSE Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 11 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 66.40

Transaction ID : B789D0FDAEAD24FF1B4D

Memo Item

**B. OCEAN PRIME**

Full Name (Last, First, Middle Initial)  
Mailing Address 123 W 52ND ST

City NEW YORK State NY Zip Code 10019-6003

Purpose of Disbursement MEETING EXPENSE Category/Type 003

Candidate Name

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 11 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 820.53

Transaction ID : BE88653A34170403B8DB

Memo Item

**C. GOGO AIR**

Full Name (Last, First, Middle Initial)  
Mailing Address 111 N CANAL ST  
FL 15

City CHICAGO State IL Zip Code 60606-7205

Purpose of Disbursement INTERNET Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 11 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 49.95

Transaction ID : B4577DD415EAC43609F1

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 Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. SHERATON HOTEL</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2019	
Mailing Address 701 E 11TH ST			FEC Identification Number C	
City AUSTIN	State TX	Zip Code 78701-2622	Amount of Each Disbursement this Period 427.01	
Purpose of Disbursement TRAVEL EXPENSES		Category/ Type 002	Transaction ID : B715E8645D5F642D5A79	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. UBER TECHNOLOGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2019	
Mailing Address 182 HOWARD ST STE 8			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 102.44	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : B6CC6CD755AEF4A1F962	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. DELTA AIR LINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2019	
Mailing Address 1030 DELTA BLVD			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30354-1989	Amount of Each Disbursement this Period 550.30	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B393BBC29DBB6426E878	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2019		
Mailing Address PO BOX 84314			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 49.06		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B38DF30836845404E9F3		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2019		
Mailing Address PO BOX 84314			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 19.80		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B22680EC3C447418F96E		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2019		
Mailing Address PO BOX 84314			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 3.54		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B48EC4DACFFBC48CF80E		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	72.40
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2019
Mailing Address PO BOX 84314		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70884-4314
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 10.06
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ARISTOTLE INTERNATIONAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2019
Mailing Address 205 PENNSYLVANIA AVE SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1164
Purpose of Disbursement SOFTWARE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 750.00
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ARISTOTLE INTERNATIONAL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2019
Mailing Address 205 PENNSYLVANIA AVE SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1164
Purpose of Disbursement SOFTWARE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 750.00
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1510.06
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. ARISTOTLE INTERNATIONAL</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2019	
Mailing Address 205 PENNSYLVANIA AVE SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1164	Amount of Each Disbursement this Period 750.00	
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : B289D5BCFAB984096A5D	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2019	
Mailing Address 215 N WALL ST			FEC Identification Number C	
City CALHOUN	State GA	Zip Code 30701-2221	Amount of Each Disbursement this Period 15.00	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : B046BD73FFAFB4422B7B	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2019	
Mailing Address 215 N WALL ST			FEC Identification Number C	
City CALHOUN	State GA	Zip Code 30701-2221	Amount of Each Disbursement this Period 15.00	
Purpose of Disbursement BANK FEES		Category/ Type 001	Transaction ID : B240E18F3AFB14181AD6	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	780.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2019
Mailing Address 215 N WALL ST		FEC Identification Number C
City CALHOUN	State GA	Zip Code 30701-2221
Purpose of Disbursement BANK FEES	001	
Candidate Name		Amount of Each Disbursement this Period 15.00
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:	Transaction ID : B60FECA37C45B4114AEE <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CARD SERVICES CENTER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019
Mailing Address PO BOX 71205		FEC Identification Number C
City CHARLOTTE	State NC	Zip Code 28272-1205
Purpose of Disbursement SEE MEMO ENTRIES	001	
Candidate Name		Amount of Each Disbursement this Period 482.11
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:	Transaction ID : B37A98E9234D246468F8 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. RACETRAC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019
Mailing Address 1135 HIGHWAY 92		FEC Identification Number C
City ACWORTH	State GA	Zip Code 30102-2085
Purpose of Disbursement TRAVEL EXPENSE	001	
Candidate Name		Amount of Each Disbursement this Period 103.50
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:	Transaction ID : B3205DFF1682C4043A32 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	497.11
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. BP OIL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address 4101 WINFIELD RD			FEC Identification Number C	
City WARRENVILLE	State IL	Zip Code 60555-3521	Amount of Each Disbursement this Period 92.83	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BED65C2192BE5414B868	
Candidate Name			<input checked="" type="checkbox"/> 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:				

Full Name (Last, First, Middle Initial) <b>B. SHELL OIL COMPANY</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address 910 LOUISIANA ST			FEC Identification Number C	
City HOUSTON	State TX	Zip Code 77002-4916	Amount of Each Disbursement this Period 94.71	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : B68E5922DDA964DAFAA7	
Candidate Name			<input checked="" type="checkbox"/> 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:				

Full Name (Last, First, Middle Initial) <b>C. CARD SERVICES CENTER</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address PO BOX 71205			FEC Identification Number C	
City CHARLOTTE	State NC	Zip Code 28272-1205	Amount of Each Disbursement this Period 4248.32	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : BF155EA92490C4DA5B94	
Candidate Name			<input type="checkbox"/> 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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4248.32
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. PRIME STORAGE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address 410 MORROW RD SE			FEC Identification Number C	
City CALHOUN	State GA	Zip Code 30701-3749	Amount of Each Disbursement this Period 55.00	
Purpose of Disbursement STORAGE		Category/ Type 001	Transaction ID : BE8EC605053214CA29AA	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. ONWARD RESERVE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address 146 E CLAYTON ST			FEC Identification Number C	
City ATHENS	State GA	Zip Code 30601-2703	Amount of Each Disbursement this Period 250.71	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : BF04538F763E84762B0C	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>C. DUNWOODY BEVERAGE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address 1418 DUNWOODY VILLAGE PKWY			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30338-4123	Amount of Each Disbursement this Period 467.54	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : BA5A76486E1764CBD8CF	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. 4IMPRINT</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address 101 COMMERCE ST			FEC Identification Number C	
City OSHKOSH	State WI	Zip Code 54901-4864	Amount of Each Disbursement this Period 598.07	
Purpose of Disbursement DONOR GIFTS (GOLF BALLS)		Category/ Type 001	Transaction ID : BF047D36B05134E0FBF6	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. SEA ISLAND OCEAN FOREST GOLF</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address 200 OCEAN RD			FEC Identification Number C	
City SEA ISLAND	State GA	Zip Code 31561	Amount of Each Disbursement this Period 287.50	
Purpose of Disbursement FUNDRAISING EVENT		Category/ Type 001	Transaction ID : B475BE0F5C4884D90B5E	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. TPWD LICENSE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address 4200 SMITH SCHOOL RD			FEC Identification Number C	
City AUSTIN	State TX	Zip Code 78744-3218	Amount of Each Disbursement this Period 355.50	
Purpose of Disbursement EVENT SUPPLIES(HUNTING LICENSE)		Category/ Type 001	Transaction ID : BDD15E4C8B5F54F23A56	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019
Mailing Address 401 COURT ST		FEC Identification Number C
City CALHOUN	State GA	Zip Code 30701-2176
Purpose of Disbursement SHIPPING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 156.00
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CHEROKEE BREWING COMPANY</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019
Mailing Address 207B W CUYLER ST		FEC Identification Number C
City DALTON	State GA	Zip Code 30720-8210
Purpose of Disbursement MEETING EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 118.85
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. FEDEX KINKO'S</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019
Mailing Address 13155 NOEL RD STE 1600		FEC Identification Number C
City DALLAS	State TX	Zip Code 75240-5032
Purpose of Disbursement SHIPPING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 322.19
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:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. CHICK-FIL-A</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address 495 HIGHWAY 53 E			FEC Identification Number C	
City CALHOUN	State GA	Zip Code 30701-3058	Amount of Each Disbursement this Period 55.16	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : BE355A3F01B214FD29DA	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. TOTAL WINE &amp; MORE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address 11325 LOCKS RD #214			FEC Identification Number C	
City POTOMAC	State MD	Zip Code 20854	Amount of Each Disbursement this Period 528.81	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 007	Transaction ID : B1FCD5B621ED94FB5B04	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. RED BUD GROCERY</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address 3952 RED BUD RD NE			FEC Identification Number C	
City CALHOUN	State GA	Zip Code 30701-9616	Amount of Each Disbursement this Period 62.62	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BAA7DF5E97636426EA06	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. AMAZON</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019
Mailing Address 1516 2ND AVE		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98101-1543
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 259.17	
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) ▼	Transaction ID : B4B4BC39B7AD14B3A888
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ROAM ATLANTA</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019
Mailing Address 3101 COBB PKWY SE STE 124		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30339-3497
Purpose of Disbursement EVENT ROOM RENTAL	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 363.53	
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) ▼	Transaction ID : B2F5950D3188E4D67A74
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CARD SERVICES CENTER</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019
Mailing Address PO BOX 71205		FEC Identification Number C
City CHARLOTTE	State NC	Zip Code 28272-1205
Purpose of Disbursement SEE MEMO ENTRIES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 500.18	
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) ▼	Transaction ID : BA5DA89FB6194445B994
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	500.18
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. BP OIL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address 4101 WINFIELD RD			FEC Identification Number C	
City WARRENVILLE	State IL	Zip Code 60555-3521	Amount of Each Disbursement this Period 143.70	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : B7527F0445F9B456F98B	
Candidate Name			<input checked="" type="checkbox"/> 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:				

Full Name (Last, First, Middle Initial) <b>B. CARD SERVICES CENTER</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address PO BOX 71205			FEC Identification Number C	
City CHARLOTTE	State NC	Zip Code 28272-1205	Amount of Each Disbursement this Period 27.50	
Purpose of Disbursement CREDIT CARD FEE		Category/ Type 001	Transaction ID : BB5564E668496420F911	
Candidate Name			<input checked="" type="checkbox"/> 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:				

Full Name (Last, First, Middle Initial) <b>C. SHELL OIL COMPANY</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address 910 LOUISIANA ST			FEC Identification Number C	
City HOUSTON	State TX	Zip Code 77002-4916	Amount of Each Disbursement this Period 48.51	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BA63AE9E86F5841539DA	
Candidate Name			<input checked="" type="checkbox"/> 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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. CARD SERVICES CENTER</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2019	
Mailing Address PO BOX 71205			FEC Identification Number C	
City CHARLOTTE	State NC	Zip Code 28272-1205	Amount of Each Disbursement this Period 1081.74	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : B0DD28369990045F7B8F	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CARD SERVICES CENTER</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2019	
Mailing Address PO BOX 71205			FEC Identification Number C	
City CHARLOTTE	State NC	Zip Code 28272-1205	Amount of Each Disbursement this Period 47.82	
Purpose of Disbursement CREDIT CARD FEE		Category/ Type 001	Transaction ID : BA262E67B623C4D80B5C	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. MAILCHIMP</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2019	
Mailing Address 512 MEANS ST NW STE 404			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30318-5788	Amount of Each Disbursement this Period 150.00	
Purpose of Disbursement E-MARKETING		Category/ Type 001	Transaction ID : B63872DB08DF54EF99EB	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1081.74
<b>TOTAL</b> This Period (last page this line number only).....▶	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2019	
Mailing Address 182 HOWARD ST STE 8			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 97.29	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BD1BE0545C0734C9A8CD	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2019	
Mailing Address PO BOX 105378			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30348-5378	Amount of Each Disbursement this Period 74.19	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : BC4C39CD34D434BE6AE7	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2019	
Mailing Address PO BOX 105378			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30348-5378	Amount of Each Disbursement this Period 72.25	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : B7823BAA3647F462D874	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. CARD SERVICES CENTER</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019
Mailing Address PO BOX 71205			FEC Identification Number C
City CHARLOTTE	State NC	Zip Code 28272-1205	Amount of Each Disbursement this Period 49.03
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : B3C12B9114A544092824
Candidate Name			<input type="checkbox"/> 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:			

Full Name (Last, First, Middle Initial) <b>B. RACETRAC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019
Mailing Address 1135 HIGHWAY 92			FEC Identification Number C
City ACWORTH	State GA	Zip Code 30102-2085	Amount of Each Disbursement this Period 39.03
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : B038C4F0FF7AF4324961
Candidate Name			<input checked="" type="checkbox"/> 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:			

Full Name (Last, First, Middle Initial) <b>C. CARD SERVICES CENTER</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019
Mailing Address PO BOX 71205			FEC Identification Number C
City CHARLOTTE	State NC	Zip Code 28272-1205	Amount of Each Disbursement this Period 1280.82
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : B4D8021F50595415B838
Candidate Name			<input type="checkbox"/> 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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1329.85
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. ROAM ATLANTA</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019	
Mailing Address 3101 COBB PKWY SE STE 124			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30339-3497	Amount of Each Disbursement this Period 3.50	
Purpose of Disbursement EVENT ROOM RENTAL		Category/ Type 001	Transaction ID : B7F3BB724944143ABABE	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. SAMS CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019	
Mailing Address 2901 CLAIRMONT RD NE			FEC Identification Number C	
City BROOKHAVEN	State GA	Zip Code 30329-1639	Amount of Each Disbursement this Period 45.00	
Purpose of Disbursement SUBSCRIPTION		Category/ Type 001	Transaction ID : B0C220B1C3C2C4E17967	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. UBER TECHNOLOGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019	
Mailing Address 182 HOWARD ST STE 8			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 61.74	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BBD3B3649F4E94723B47	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. PRIME STORAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019
Mailing Address 410 MORROW RD SE		FEC Identification Number C
City CALHOUN	State GA	Zip Code 30701-3749
Purpose of Disbursement STORAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 110.00
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. DELTA AIR LINES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019
Mailing Address 1030 DELTA BLVD		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30354-1989
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 588.60
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CANOPY</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019
Mailing Address 975 7TH ST SW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20024-3437
Purpose of Disbursement EVENT CATERING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 282.38
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:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. CARD SERVICES CENTER</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019	
Mailing Address PO BOX 71205			FEC Identification Number C	
City CHARLOTTE	State NC	Zip Code 28272-1205	Amount of Each Disbursement this Period 834.60	
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : B8F6D923A12594510AA5	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CARD SERVICES CENTER</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2019	
Mailing Address PO BOX 71205			FEC Identification Number C	
City CHARLOTTE	State NC	Zip Code 28272-1205	Amount of Each Disbursement this Period - 47.82	
Purpose of Disbursement CREDIT CARD FEE REFUND		Category/ Type 001	Transaction ID : B4779D27E77044F548E2	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019	
Mailing Address PO BOX 105378			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30348-5378	Amount of Each Disbursement this Period 74.19	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : B6F28C5975D144349B66	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	834.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019	
Mailing Address 300 1ST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 312.25	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B51DADC78BA1D49AFBD9	
Candidate Name			<input checked="" type="checkbox"/> 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:				

Full Name (Last, First, Middle Initial) <b>B. HALYARDS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019	
Mailing Address 55 CINEMA LN			FEC Identification Number C	
City SAINT SIMONS ISLAND	State GA	Zip Code 31522-6600	Amount of Each Disbursement this Period 233.08	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : BA6171A853E18445B832	
Candidate Name			<input checked="" type="checkbox"/> 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:				

Full Name (Last, First, Middle Initial) <b>C. UBER TECHNOLOGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019	
Mailing Address 182 HOWARD ST STE 8			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 182.77	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BF009ADFCB01344CFA93	
Candidate Name			<input checked="" type="checkbox"/> 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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. CARD SERVICES CENTER</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019		
Mailing Address PO BOX 71205			FEC Identification Number C		
City CHARLOTTE	State NC	Zip Code 28272-1205	Amount of Each Disbursement this Period 749.75		
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : BABB34CB21D484356B11		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. RACETRAC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019		
Mailing Address 1135 HIGHWAY 92			FEC Identification Number C		
City ACWORTH	State GA	Zip Code 30102-2085	Amount of Each Disbursement this Period 38.39		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : B1D41E74B4E0B4C00830		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. RACETRAC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019		
Mailing Address 1135 HIGHWAY 92			FEC Identification Number C		
City ACWORTH	State GA	Zip Code 30102-2085	Amount of Each Disbursement this Period 60.00		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BCEF11B8EA8534A0CAE3		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	749.75
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. DAYS CHEVROLET</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019
Mailing Address 3693 COBB PKWY NW		FEC Identification Number C
City ACWORTH	State GA	Zip Code 30101-5740
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 390.58
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. BP OIL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019
Mailing Address 4101 WINFIELD RD		FEC Identification Number C
City WARRENVILLE	State IL	Zip Code 60555-3521
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 46.64
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. SHELL OIL COMPANY</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2019
Mailing Address 910 LOUISIANA ST		FEC Identification Number C
City HOUSTON	State TX	Zip Code 77002-4916
Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 55.27
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:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. CARD SERVICES CENTER</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019
Mailing Address PO BOX 71205		FEC Identification Number C
City CHARLOTTE	State NC	Zip Code 28272-1205
Purpose of Disbursement BANK FEE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 22.50
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:	Transaction ID : B4A2D356B7AB249A98FA <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CARD SERVICES CENTER</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019
Mailing Address PO BOX 71205		FEC Identification Number C
City CHARLOTTE	State NC	Zip Code 28272-1205
Purpose of Disbursement SEE MEMO ENTRIES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 621.29
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:	Transaction ID : BC848B053698F421F8C6 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. RACETRAC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019
Mailing Address 1135 HIGHWAY 92		FEC Identification Number C
City ACWORTH	State GA	Zip Code 30102-2085
Purpose of Disbursement TRAVEL EXPENSE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 42.00
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:	Transaction ID : B03CAC4E86411449D967 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	643.79
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. SHELL OIL COMPANY</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019	
Mailing Address 910 LOUISIANA ST			FEC Identification Number C	
City HOUSTON	State TX	Zip Code 77002-4916	Amount of Each Disbursement this Period 85.06	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 002	Transaction ID : B3AFA36F521924938B14	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. BP GAS STATION</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019	
Mailing Address 1090 RED BUD RD NE			FEC Identification Number C	
City CALHOUN	State GA	Zip Code 30701-2081	Amount of Each Disbursement this Period 244.89	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BCEB0B819A69947FD8BF	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. O'REILLY AUTO PARTS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019	
Mailing Address 150 MARKET SQUARE			FEC Identification Number C	
City CARTERSVILLE	State GA	Zip Code 30120-2854	Amount of Each Disbursement this Period 67.38	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : BC7F78DF155D843E885E	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. CARD SERVICES CENTER</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019		
Mailing Address PO BOX 71205			FEC Identification Number C		
City CHARLOTTE	State NC	Zip Code 28272-1205	Amount of Each Disbursement this Period 1836.51		
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type 001	Transaction ID : BFD32EBF095B540F7BE2		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. BARNSLEY GARDENS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019		
Mailing Address 597 BARNSLEY GARDENS RD NW			FEC Identification Number C		
City ADAIRSVILLE	State GA	Zip Code 30103-5712	Amount of Each Disbursement this Period 429.76		
Purpose of Disbursement LODGING		Category/ Type 002	Transaction ID : B4D9ED35859E44B06A04		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. PRIME STORAGE</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019		
Mailing Address 410 MORROW RD SE			FEC Identification Number C		
City CALHOUN	State GA	Zip Code 30701-3749	Amount of Each Disbursement this Period 55.00		
Purpose of Disbursement STORAGE		Category/ Type 001	Transaction ID : B206925ECCABD46AC9CA		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1836.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. ROAM ATLANTA</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019
Mailing Address 3101 COBB PKWY SE STE 124		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30339-3497
Purpose of Disbursement EVENT ROOM RENTAL	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 286.71	
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) ▼	Transaction ID : B16F83111BF1F4233BBC
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. FEDEX KINKO'S</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019
Mailing Address 13155 NOEL RD STE 1600		FEC Identification Number C
City DALLAS	State TX	Zip Code 75240-5032
Purpose of Disbursement PRINTING	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 885.36	
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) ▼	Transaction ID : B8B969C0AA26848E5B1E
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CARD SERVICES CENTER</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019
Mailing Address PO BOX 71205		FEC Identification Number C
City CHARLOTTE	State NC	Zip Code 28272-1205
Purpose of Disbursement SEE MEMO ENTRIES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 576.58	
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) ▼	Transaction ID : B1D026B7F836C4BB7A97
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	576.58
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. ALL SOULS BAR</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019	
Mailing Address 3125 725 T ST NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 222.99	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B098B53C9B42541CDB32	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019	
Mailing Address PO BOX 105378			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30348-5378	Amount of Each Disbursement this Period 74.19	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001	Transaction ID : B0B410F238EDD48884F	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019	
Mailing Address 300 1ST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 149.60	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B9E258B7BBD24484ABEA	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. CREATIVE DIRECT</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2019		
Mailing Address 25 E MAIN ST			FEC Identification Number C		
City RICHMOND	State VA	Zip Code 23219-2109	Amount of Each Disbursement this Period 2386.00		
Purpose of Disbursement DIRECT MAIL		Category/ Type 001	Transaction ID : BD6579D33F602448395D		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. FILLINGIM, KRISTIN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2019		
Mailing Address 6210 36TH ST N			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22213-1408	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement FIELD CONSULTING		Category/ Type 001	Transaction ID : B3B0CC3D0581646BFBA0		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. FILLINGIM, KRISTIN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2019		
Mailing Address 6210 36TH ST N			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22213-1408	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement FIELD CONSULTING		Category/ Type 001	Transaction ID : B750EF3B5EE5A4F958E8		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3386.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. FILLINGIM, KRISTIN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2019	
Mailing Address 6210 36TH ST N			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22213-1408	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement FIELD CONSULTING		Category/ Type 001	Transaction ID : B13FA5E905A9C4EA3927	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. FOLEY AND LARDNER, LLP</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2019	
Mailing Address 3000 K ST NW STE 600			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20007-5111	Amount of Each Disbursement this Period 74.00	
Purpose of Disbursement LEGAL FEES		Category/ Type 001	Transaction ID : B674EC5FF47E44FF2B7C	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. FOLEY AND LARDNER, LLP</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2019	
Mailing Address 3000 K ST NW STE 600			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20007-5111	Amount of Each Disbursement this Period 74.00	
Purpose of Disbursement LEGAL FEES		Category/ Type 001	Transaction ID : BE5C949C1C9BD4275A10	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	648.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 82
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. FOLEY AND LARDNER, LLP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019
Mailing Address 3000 K ST NW STE 600		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20007-5111
Purpose of Disbursement LEGAL FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1110.00
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:	Transaction ID : BEF5FA4A8B7D04A58910 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. GEORGIA PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2019
Mailing Address 2470 DANIELL'S BRIDGE RD, STE 121		FEC Identification Number C C00490235
City ATHENS	State GA	Zip Code 30606-6191
Purpose of Disbursement REIMBURSE 10/10/19 AMEX PMT OF \$6593.91	Category/ Type 001	
Candidate Name <b>GEORGIA PAC</b>		Amount of Each Disbursement this Period 1879.71
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:	Transaction ID : B8D241534453E4718A3E <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. GRAVES, JOHN, THOMAS, , JR.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2019
Mailing Address 475 CRAIG RD NE		FEC Identification Number C
City RANGER	State GA	Zip Code 30734-9703
Purpose of Disbursement SEE MEMO	Category/ Type	
Candidate Name		Amount of Each Disbursement this Period 544.00
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:	Transaction ID : B987579AD57CB4976BB8 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3533.71
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2019
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C
City FT WORTH	State TX	Zip Code 76155-2605
Purpose of Disbursement TRAVEL EXPENSES		Amount of Each Disbursement this Period 5.00
Candidate Name		Transaction ID : B42EC9BF2CF344376A0B
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) <b>B. DELTA AIR LINES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2019
Mailing Address 1030 DELTA BLVD		FEC Identification Number C
City ATLANTA	State GA	Zip Code 30354-1989
Purpose of Disbursement TRAVEL EXPENSES		Amount of Each Disbursement this Period 44.00
Candidate Name		Transaction ID : B4C55511170704931915
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) <b>C. LOUDERMILK, TRAVIS, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019
Mailing Address 47 WALKER RD NW		FEC Identification Number C
City CARTERSVILLE	State GA	Zip Code 30121-9215
Purpose of Disbursement MILEAGE REIMBURSEMENT		Amount of Each Disbursement this Period 33.64
Candidate Name		Transaction ID : BC57ACF7BB2534F1CA65
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) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	33.64
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. LOUDERMILK, TRAVIS, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2019	
Mailing Address 47 WALKER RD NW			FEC Identification Number C	
City CARTERSVILLE	State GA	Zip Code 30121-9215	Amount of Each Disbursement this Period 46.40	
Purpose of Disbursement MILEAGE REIMBURSEMENT		Category/Type	Transaction ID : B4A2A17C44AF540FB896	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. OVATION PAYROLL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2019	
Mailing Address 13010 MORRIS RD			FEC Identification Number C	
City ALPHARETTA	State GA	Zip Code 30004-3873	Amount of Each Disbursement this Period 84.30	
Purpose of Disbursement PAYROLL FEES		Category/Type 001	Transaction ID : B848C86E9D8BB42A0B10	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. OVATION PAYROLL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2019	
Mailing Address 13010 MORRIS RD			FEC Identification Number C	
City ALPHARETTA	State GA	Zip Code 30004-3873	Amount of Each Disbursement this Period 248.50	
Purpose of Disbursement PAYROLL TAXES		Category/Type 001	Transaction ID : B760E171E8EDB4D19BA5	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	379.20
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. OVATION PAYROLL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2019		
Mailing Address 13010 MORRIS RD			FEC Identification Number C		
City ALPHARETTA	State GA	Zip Code 30004-3873	Amount of Each Disbursement this Period 1369.65		
Purpose of Disbursement SEE MEMO		Category/ Type 001	Transaction ID : BBCFF50E704B0441C819		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. LOUDERMILK, TRAVIS, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2019		
Mailing Address 47 WALKER RD NW			FEC Identification Number C		
City CARTERSVILLE	State GA	Zip Code 30121-9215	Amount of Each Disbursement this Period 461.75		
Purpose of Disbursement PAYROLL EXPENSE		Category/ Type 001	Transaction ID : B4B8F9D38F80544D7869		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. WHITMIRE, JOHN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2019		
Mailing Address 1258 MILE POST DR			FEC Identification Number C		
City DUNWOODY	State GA	Zip Code 30338-4709	Amount of Each Disbursement this Period 907.90		
Purpose of Disbursement PAYROLL EXPENSE		Category/ Type 001	Transaction ID : B565AE6D09DEC4547B4C		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1369.65
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. OVATION PAYROLL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2019
Mailing Address 13010 MORRIS RD		FEC Identification Number C
City ALPHARETTA	State GA	Zip Code 30004-3873
Purpose of Disbursement PAYROLL FEES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 84.30
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:	Transaction ID : BDF18A887C32B47729B7 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. OVATION PAYROLL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2019
Mailing Address 13010 MORRIS RD		FEC Identification Number C
City ALPHARETTA	State GA	Zip Code 30004-3873
Purpose of Disbursement PAYROLL TAXES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 248.30
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:	Transaction ID : B1C741AB4051D42BFB7B <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. OVATION PAYROLL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2019
Mailing Address 13010 MORRIS RD		FEC Identification Number C
City ALPHARETTA	State GA	Zip Code 30004-3873
Purpose of Disbursement SEE MEMO	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 1369.65
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:	Transaction ID : BF41D5CE812B84347BEF <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1702.25
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. LOUDERMILK, TRAVIS, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2019	
Mailing Address 47 WALKER RD NW			FEC Identification Number C	
City CARTERSVILLE	State GA	Zip Code 30121-9215	Amount of Each Disbursement this Period 461.75	
Purpose of Disbursement PAYROLL EXPENSE		Category/ Type 001	Transaction ID : BE12E16BD0A3B44D8BFF	
Candidate Name			<input checked="" type="checkbox"/> 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:				

Full Name (Last, First, Middle Initial) <b>B. WHITMIRE, JOHN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2019	
Mailing Address 1258 MILE POST DR			FEC Identification Number C	
City DUNWOODY	State GA	Zip Code 30338-4709	Amount of Each Disbursement this Period 907.90	
Purpose of Disbursement PAYROLL EXPENSE		Category/ Type 001	Transaction ID : BFE93106CAC6F4D9892D	
Candidate Name			<input checked="" type="checkbox"/> 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:				

Full Name (Last, First, Middle Initial) <b>C. OVATION PAYROLL</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2019	
Mailing Address 13010 MORRIS RD			FEC Identification Number C	
City ALPHARETTA	State GA	Zip Code 30004-3873	Amount of Each Disbursement this Period 248.30	
Purpose of Disbursement PAYROLL TAXES		Category/ Type 001	Transaction ID : B2A0FA58F06DF46D6887	
Candidate Name			<input type="checkbox"/> 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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	248.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A. OVATION PAYROLL**

Full Name (Last, First, Middle Initial)  
Mailing Address 13010 MORRIS RD

City ALPHARETTA State GA Zip Code 30004-3873

Purpose of Disbursement PAYROLL FEES Category/Type 001

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 166.10

Transaction ID : B9352EFD506FB427C863

Memo Item

**B. OVATION PAYROLL**

Full Name (Last, First, Middle Initial)  
Mailing Address 13010 MORRIS RD

City ALPHARETTA State GA Zip Code 30004-3873

Purpose of Disbursement SEE MEMO Category/Type 001

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 1369.65

Transaction ID : B490F191FF78840C29F4

Memo Item

**C. LOUDERMILK, TRAVIS, , ,**

Full Name (Last, First, Middle Initial)  
Mailing Address 47 WALKER RD NW

City CARTERSVILLE State GA Zip Code 30121-9215

Purpose of Disbursement PAYROLL EXPENSE Category/Type 001

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 461.75

Transaction ID : BD3BAF6B1EFDB4B5A9C6

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1535.75

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. WHITMIRE, JOHN, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2019		
Mailing Address 1258 MILE POST DR			FEC Identification Number C		
City DUNWOODY	State GA	Zip Code 30338-4709	Amount of Each Disbursement this Period 907.90		
Purpose of Disbursement PAYROLL EXPENSE		Category/ Type 001	Transaction ID : BBAE03BBEB4004CD3A75		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. OWEN SECURITY SOLUTIONS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019		
Mailing Address 209 S WALL ST			FEC Identification Number C		
City CALHOUN	State GA	Zip Code 30701-2245	Amount of Each Disbursement this Period 3652.63		
Purpose of Disbursement RESIDENTIAL SECURITY EXPENSE		Category/ Type 001	Transaction ID : BEC62AFC354FA4A8D88B		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. PLP ENTERPRISES, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2019		
Mailing Address 3452 ESSEX AVE			FEC Identification Number C		
City ATLANTA	State GA	Zip Code 30339-5752	Amount of Each Disbursement this Period 4010.00		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : BE292858379CD4E69A03		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7662.63
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. PLP ENTERPRISES, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2019		
Mailing Address 3452 ESSEX AVE					
City ATLANTA	State GA	Zip Code 30339-5752	FEC Identification Number C		
Purpose of Disbursement FUNDRAISING CONSULTING		001	Amount of Each Disbursement this Period 2000.00		
Candidate Name		Category/ Type	Transaction ID : B827FF6C1FE384FB098A		
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) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>B. PLP ENTERPRISES, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2019		
Mailing Address 3452 ESSEX AVE					
City ATLANTA	State GA	Zip Code 30339-5752	FEC Identification Number C		
Purpose of Disbursement FUNDRAISING CONSULTING		001	Amount of Each Disbursement this Period 2000.00		
Candidate Name		Category/ Type	Transaction ID : B75990D69182E4410BCC		
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) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>C. PROFESSIONAL DATA SERVICES</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019		
Mailing Address 824 S MILLEDGE AVE STE 101					
City ATHENS	State GA	Zip Code 30605-1332	FEC Identification Number C		
Purpose of Disbursement COMPLIANCE CONSULTING		001	Amount of Each Disbursement this Period 2006.00		
Candidate Name		Category/ Type	Transaction ID : B96AE0527ACF446DCA00		
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) ▼		Memo Item <input type="checkbox"/>		
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6006.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. PROFESSIONAL DATA SERVICES</b>		M M / D D / Y Y Y Y 11 / 04 / 2019
Mailing Address 824 S MILLEDGE AVE STE 101		FEC Identification Number
City ATHENS	State GA	Zip Code 30605-1332
Purpose of Disbursement COMPLIANCE CONSULTING		001
Candidate Name		Category/ Type
Office Sought:	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:	Amount of Each Disbursement this Period 2060.52
		Transaction ID : BF2989AA905994CECB20
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. PROFESSIONAL DATA SERVICES</b>		M M / D D / Y Y Y Y 11 / 27 / 2019
Mailing Address 824 S MILLEDGE AVE STE 101		FEC Identification Number
City ATHENS	State GA	Zip Code 30605-1332
Purpose of Disbursement COMPLIANCE CONSULTING		001
Candidate Name		Category/ Type
Office Sought:	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:	Amount of Each Disbursement this Period 2026.00
		Transaction ID : B7199B4E04E21494694B
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. PROFESSIONAL DATA SERVICES</b>		M M / D D / Y Y Y Y 12 / 20 / 2019
Mailing Address 824 S MILLEDGE AVE STE 101		FEC Identification Number
City ATHENS	State GA	Zip Code 30605-1332
Purpose of Disbursement COMPLIANCE CONSULTING		001
Candidate Name		Category/ Type
Office Sought:	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:	Amount of Each Disbursement this Period 2052.53
		Transaction ID : B4F9441D904094A3C9BE
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6139.05
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. RIGHT PATH STRATEGIC AFFAIRS, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019
Mailing Address 3960 ROLLING HILLS DR		FEC Identification Number C
City CUMMING	State GA	Zip Code 30041-9446
Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2500.00
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:	Transaction ID : B8958A54864C04480B65 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. RIGHT PATH STRATEGIC AFFAIRS, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2019
Mailing Address 3960 ROLLING HILLS DR		FEC Identification Number C
City CUMMING	State GA	Zip Code 30041-9446
Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2500.00
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:	Transaction ID : B93F9FAE6ECB2451E9B9 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. RIGHT PATH STRATEGIC AFFAIRS, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2019
Mailing Address 3960 ROLLING HILLS DR		FEC Identification Number C
City CUMMING	State GA	Zip Code 30041-9446
Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2500.00
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:	Transaction ID : B7A233F4D06B54F6FA8C <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. STEWART, DANIELLE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2019	
Mailing Address 1433 A ST NE APT D			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002-8430	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement FIELD CONSULTING		Category/ Type 001	Transaction ID : BFDDDC9ACD58A4372B3C	
Candidate Name			<input type="checkbox"/> 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:				

Full Name (Last, First, Middle Initial) <b>B. STEWART, DANIELLE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2019	
Mailing Address 1433 A ST NE APT D			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002-8430	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement FIELD CONSULTING		Category/ Type 001	Transaction ID : B5563F1333BE845189A0	
Candidate Name			<input type="checkbox"/> 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:				

Full Name (Last, First, Middle Initial) <b>C. STEWART, DANIELLE, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2019	
Mailing Address 1433 A ST NE APT D			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002-8430	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement FIELD CONSULTING		Category/ Type 001	Transaction ID : BF14A1E0833B5401AAE1	
Candidate Name			<input type="checkbox"/> 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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) <b>A. THE ELEVATED GROUP, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2019	
Mailing Address 410 1ST ST SE, STE 310			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1866	Amount of Each Disbursement this Period 10618.76	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B90D1A185D63B4009996	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. THE ELEVATED GROUP, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2019	
Mailing Address 410 1ST ST SE, STE 310			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1866	Amount of Each Disbursement this Period 16666.50	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : BC887FDAEEE248EEBFE	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. THE ELEVATED GROUP, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2019	
Mailing Address 410 1ST ST SE, STE 310			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1866	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B503A0956B0574EBBB43	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	28785.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 82			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. THE ELEVATED GROUP, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2019		
Mailing Address 410 1ST ST SE, STE 310					
City WASHINGTON	State DC	Zip Code 20003-1866	FEC Identification Number C		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Amount of Each Disbursement this Period 6292.54		
Candidate Name		Transaction ID : BDC47EBC12BD441BA8D6			
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) <b>B. THE ELEVATED GROUP, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2019		
Mailing Address 410 1ST ST SE, STE 310					
City WASHINGTON	State DC	Zip Code 20003-1866	FEC Identification Number C		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Amount of Each Disbursement this Period 1500.00		
Candidate Name		Transaction ID : B036694F9E634445887C			
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) <b>C. THE ELEVATED GROUP, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019		
Mailing Address 410 1ST ST SE, STE 310					
City WASHINGTON	State DC	Zip Code 20003-1866	FEC Identification Number C		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Amount of Each Disbursement this Period 15680.85		
Candidate Name		Transaction ID : BC2407456DEF440CEB1D			
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) ▼		<input type="checkbox"/> Memo Item		
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	23473.39
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 82			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

**A. T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 601 PENNSYLVANIA AVENUE NW  
SUITE 800 NORTH BLDG.

City WASHINGTON State DC Zip Code 20004-2710

Purpose of Disbursement IN-KIND:MEETING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 22 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 500.00

Transaction ID : BCEE05F7F32EB48EF8AD

Memo Item

**B. VERIZON WIRELESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 105378

City ATLANTA State GA Zip Code 30348-5378

Purpose of Disbursement TELEPHONE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 11 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 379.62

Transaction ID : B646F20683C6D4AA7B36

Memo Item

**C. VERIZON WIRELESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 105378

City ATLANTA State GA Zip Code 30348-5378

Purpose of Disbursement TELEPHONE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 14 / 2019

FEC Identification Number: C

Amount of Each Disbursement this Period: 379.71

Transaction ID : BE75245638DF04184B6D

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1259.33

**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 Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 82	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. VERIZON WIRELESS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2019	
Mailing Address PO BOX 105378			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30348-5378	Amount of Each Disbursement this Period 644.70	
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : BEC441C93794843A7B55	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	644.70
<b>TOTAL</b> This Period (last page this line number only).....▶	125093.13

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 82			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) <b>A. TERRY COLEMAN CONSULTING, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2019		
Mailing Address 285 CENTENNIAL OLYMPIC PARK DR NW UNIT 2008			FEC Identification Number C		
City ATLANTA	State GA	Zip Code 30313-1855	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement REFUND		Category/ Type 010	Transaction ID : BAF3CC20C221E4FD1828		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 82	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. CTIA PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2019
Mailing Address 1400 16TH ST NW STE 600		FEC Identification Number C C00262295
City WASHINGTON	State DC	Zip Code 20036-2225
Purpose of Disbursement REFUND		010 Category/ Type
Candidate Name CTIA PAC		Amount of Each Disbursement this Period 2000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9F6056650AE14C6387D
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Category/ Type
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Category/ Type
Candidate Name		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 82	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. GEORGIA LIFE ALLIANCE COMMITTEE, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2019
Mailing Address PO BOX 725546		FEC Identification Number <b>C</b>
City ATLANTA	State GA Zip Code 31139-2546	
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
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) ▼	Transaction ID : <b>B509862268D6F4011871</b>
State: District:		
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. LEADERSHIP GEORGIA FOUNDATION, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2019
Mailing Address 3348 PEACHTREE RD NE STE 700		FEC Identification Number <b>C</b>
City ATLANTA	State GA Zip Code 30326-1682	
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
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) ▼	Transaction ID : <b>B127E82F0D7F34AB9BCB</b>
State: District:		
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number <b>C</b>
City	State Zip Code	
Purpose of Disbursement		Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7500.00